

Health and Wellness

**Alberta Health Care Insurance Plan
Statistical Supplement
2007-2008**

Alberta

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Information on performance measures and financial statements is provided in the *Alberta Ministry of Health and Wellness Annual Report Section I and II 2007/2008*. Copies of the annual report are available from the Communications Branch or the ministry website.

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Alberta Health Care Insurance Plan

Statistical Supplement

2007/2008

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Introduction

What is the Alberta Health Care Insurance Plan (AHCIP)?

The Alberta Health Care Insurance Plan (AHCIP) is a publicly funded health care plan. It is established in accordance with the *Canada Health Act* principles of public administration, comprehensiveness, universality, portability and accessibility.

The AHCIP provides two types of coverage to Albertans. They are:

- basic health coverage (for medically required services provided by physicians, dentists/oral surgeons and hospitals, and limited coverage for services provided by chiropractors, optometrists and podiatrists). All residents of Alberta are required to register for AHCIP coverage, but residents have the option to opt out. There is a monthly premium for this coverage, except for those individuals and their dependants who are enrolled in special coverage categories (such as seniors, recipients of Alberta Widows' Pension or Income Support) or individuals entitled to full premium assistance.
- supplemental health insurance through Non-Group Supplementary plans, for pharmaceutical and selected health service coverage. These supplemental plans cover services beyond those required by the *Canada Health Act* and are funded by Alberta Health and Wellness, and administered by Alberta Blue Cross. Coverage is available to all Albertans under the age of 65 and their dependants, subject to the payment of a monthly premium. Premium-free coverage is provided to seniors and their dependants, and to recipients of the Alberta Widows' Pension and their dependants. In addition, premium-free drug coverage is provided to people who have been diagnosed as being palliative and who receive their health care at home.

What can I find in the Statistical Supplement?

The Statistical Supplement is an extension of the *Alberta Ministry of Health and Wellness Annual Report Section I and II 2007/2008* and includes data on the number of people registered with the AHCIP, payments made by the AHCIP to Alberta physicians and allied practitioners (dentists/oral surgeons, chiropractors, optometrists and podiatrists) for services provided to Albertans, and payments for services provided to Albertans out of the country. The Statistical Supplement also reports data on the Non-Group Supplementary Plans.

How is data reported in the Statistical Supplement?

This edition of the Statistical Supplement reports data for the period April 1, 2007 to March 31, 2008. Where feasible, data covers a five-year period to assist in longer-term comparisons. Regional health authority data are provided only for the current year, since regional boundaries are subject to change, making data for previous years incomparable. Boundaries were last adjusted on December 1, 2003.

The majority of data are reported on a date-of-service basis, with the exception of Section 4, Non-Group Supplementary Plans, which reports data on a date-of-payment basis.

Note: Some totals in the Statistical Supplement differ from those in the annual report. The Statistical Supplement uses claims payment data from the Claims Assessment System (CLASS), based on date-of-service, while the annual report uses financial statement data, based on date-of-payment, from the Alberta Government Integrated Management Information System (IMAGIS).

Information not included in the Statistical Supplement

The following information is not included in the Statistical Supplement:

- AHCIP payments for medical and hospital services Albertans received in other Canadian provinces/territories;
- regional health authority services and costs (e.g. hospital and home care services and costs); and
- Alberta Cancer Board services and costs.

The *Alberta Ministry of Health and Wellness Annual Report Section I and II 2007/2008* provides a range of financial information pertaining to regions and the Alberta Cancer Board. A copy of the annual report can be found on the Alberta Health and Wellness website at www.health.alberta.ca.

Did You Know?

72% of Albertans rate their satisfaction with overall quality of and access to health services as good or excellent.

Source: Health Quality Council of Alberta

Did You Know?

Albertans expect the best possible care and outcomes when they use the health system. Alberta Health and Wellness established a quality framework including the following six dimensions of quality health services:

- 1) acceptability,
- 2) appropriateness,
- 3) effectiveness,
- 4) efficiency,
- 5) accessibility, and
- 6) safety.

Section 1: Registration

Summary

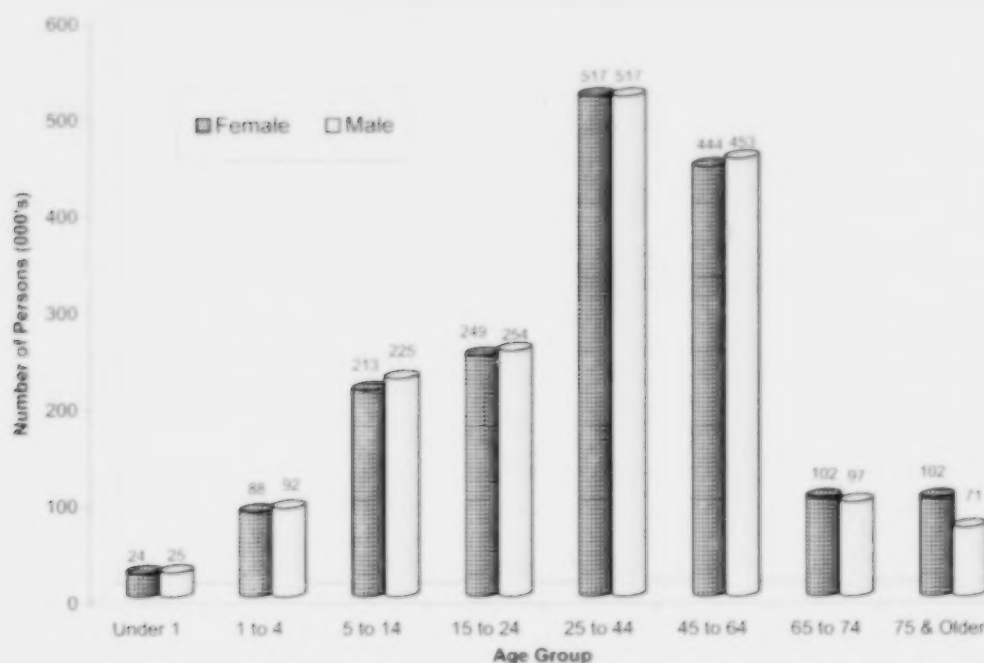
This section provides statistics on the number of Albertans covered under the Alberta Health Care Insurance Plan (AHCIP) for basic health services. The tables provide registration data by premium status and subsidy level, and by age and gender as at March 31, 2008.

Highlights

- A total of 3,473,996 Albertans were entitled to basic health coverage. This is an increase of 3 per cent compared to 2006/2007. Included in this total are 45,531 individuals who have temporary Canada entry documents (e.g. Minister's Permits, Work Permits, Study Permits) and are registered with the AHCIP compared to 29,477 individuals in 2006/2007.
- Overall, 23 per cent of the total population covered by the AHCIP paid reduced premiums or were fully exempt from paying premiums in 2007/2008.
- On average, during 2007/2008, approximately 6,300 Albertans (4,000 registrations) per month were on the Waiver of Premiums Program compared to 7,600 Albertans (4,700 registrations) in 2006/2007.
- The number of Employment and Immigration Income Support recipients who received premium-free coverage was 89,224; an increase of 2 per cent compared to the 2006/2007 year.
- In 2007/2008, the number of Albertans who chose to opt out of the AHCIP increased to 292 compared to 255 in 2006/2007.

Figures and Charts

Figure 1
Population Covered for Basic Health Benefits
by Age and Gender as at March 31, 2008



Explanatory Notes

Income Support Category

This category is comprised of Albertans who receive financial benefits through the Employment and Immigration Income Support Program. Income Support recipients receive premium-free AHCIP coverage.

Individual and Group Category

This category is comprised of Albertans who make AHCIP premium payments either directly to Alberta Health and Wellness or through group plans (e.g. employers who submit premiums on behalf of their employees).

Opting Out

Every year, Albertans who object to the AHCIP may opt out. These individuals and their dependants are responsible for paying all of their health care expenses. Previously people who opted out did so for a full benefit year, which was July 1 of one year to June 30 of the following year. On April 1, 2007 the Opt Out program changed from a renewable one-year term to a three-year term with the resident having the option to rescind their decision to opt-out at any time.

Premium Assistance Programs

Premium rates for AHCIP coverage are \$88 per month (\$1,056 per year) for family coverage (two or more people) and \$44 per month (\$528 per year) for single coverage. To assist lower-income Albertans with the cost of premiums, Alberta Health and Wellness has two premium assistance programs residents can apply for: 1) the Premium Subsidy Program and 2) the Waiver of Premiums Program.

Eligibility for the Premium Subsidy Program is based on the applicant's family category and the taxable income of the applicant and his/her spouse/adult interdependent partner (if applicable) for the year preceding the subsidy period. A subsidy period runs from April 1 of one year to March 31 of the following year.

Family category (shown below) is determined based on whether or not the applicant is single or there are children and/or a spouse/adult interdependent partner on the registration account.

| 2007/2008 Premium Subsidy Thresholds | | |
|--------------------------------------|----------------|----------------|
| Family Category | Full Subsidy* | Full Premiums* |
| Single | under \$17,450 | over \$20,970 |
| Family - no children | under \$26,200 | over \$33,240 |
| Family - with children | under \$32,210 | over \$39,250 |

*If the combined incomes of the applicant and his/her spouse/partner fall between the thresholds for full subsidy and full premiums, a partial subsidy is granted.

The Waiver of Premiums Program is designed to assist Albertans who are presently experiencing short-term financial difficulties. Eligibility is based on the average gross monthly income for the three calendar months prior to the date the application is signed. If there is a spouse or adult interdependent partner on the account, both individuals are required to report their income. If the average monthly income is under the qualifying level (shown below), premiums are waived for a six-month period.

| 2007/2008 Waiver of Premium Thresholds | |
|--|--------------|
| Family Category | Income Level |
| Single | \$1,430 |
| Family - no children | \$2,270 |
| Family - with children | \$2,670 |

Registrations

Registration data are based on the number of active registrations on the AHCIP files as of the last day of the fiscal year (March 31). Individuals registered with the AHCIP for part of the year, but not on March 31, are excluded. The number of registrations differs from the number of people covered. There is usually one registration per family household. The number of people covered under one registration ranges from one (single coverage) to two or more (family coverage). Details regarding the number of registrations are in Table 1.1 and Table 1.2.

The population data reported in the Statistical Supplement differs from Statistics Canada provincial population estimates because:

- Alberta Health and Wellness continually updates AHCIP data.
- Persons who are temporarily absent from the province or who have left the province permanently, but retain their coverage for a period of three months (up to March 31), are included in the data.
- Members of the Armed Forces, members of the RCMP, and inmates of federal penitentiaries are covered by the federal government. These groups are not entitled to AHCIP coverage so they are not included in the AHCIP data. However, their family members who live permanently in Alberta are entitled to AHCIP coverage and are included in the data, where applicable.

Seniors Category

Alberta Health and Wellness provides premium-free AHCIP coverage and Non-Group Supplementary Plan coverage to all Alberta seniors and their dependants, regardless of income. Refer to Section 4, Non-Group Supplementary Plans, for more details about Non-Group Supplementary coverage.

Widows' Pension Category

Prior to April 1, 2004, lower income widows or widowers, aged 55 to 64, could apply for financial, health care and housing assistance through Employment and Immigration's Alberta Widows' Pension (AWP) plan. As of April 1, 2004, no new applications have been accepted and Employment and Immigration staff direct people who inquire about the AWP to appropriate income support programs. With no new applicants, the number of AWP recipients continues to decline.

Currently, recipients of AWP and their eligible dependants receive both premium-free AHCIP coverage and Non-Group Supplementary coverage. Refer to Section 4, Non-Group Supplementary Plans, for more details about Non-Group Supplementary coverage.

Did You Know?

Over 23% of the total population covered by the Alberta Health Care Insurance Plan paid reduced or no premiums this year.

Table 1.1
Number of Registrations and Population Covered
as at March 31, 2004, 2005, 2006, 2007 and 2008⁽¹⁾

| Population Categories | Number of Registrations | | | | | Percentage Change | | | |
|----------------------------------|-------------------------|------------------|------------------|------------------|------------------|-------------------|---------------|---------------|---------------|
| | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 | 2005/ 2004 | 2006/ 2005 | 2007/ 2006 | 2008/ 2007 |
| Individual and Group | 1,250,087 | 1,272,089 | 1,310,030 | 1,369,270 | 1,417,542 | 1.76 | 2.98 | 4.52 | 3.53 |
| Seniors | 248,345 | 256,894 | 263,967 | 271,148 | 279,446 | 3.44 | 2.75 | 2.72 | 3.06 |
| Widows' Pension | 1,921 | 1,636 | 1,317 | 1,012 | 772 | (14.84) | (19.50) | (23.16) | (23.72) |
| Income Support Recipients | 53,485 | 56,800 | 55,559 | 56,741 | 57,996 | 6.20 | (2.18) | 2.13 | 2.21 |
| Total | 1,553,838 | 1,587,419 | 1,630,873 | 1,698,171 | 1,755,756 | 2.16% | 2.74% | 4.13% | 3.39% |

| Population Categories | Population Covered | | | | | Percentage Change | | | |
|----------------------------------|--------------------|------------------|------------------|------------------|------------------|-------------------|---------------|---------------|---------------|
| | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 | 2005/ 2004 | 2006/ 2005 | 2007/ 2006 | 2008/ 2007 |
| Individual and Group | 2,718,333 | 2,741,056 | 2,800,619 | 2,897,475 | 2,972,259 | 0.84 | 2.17 | 3.46 | 2.58 |
| Seniors | 363,201 | 376,993 | 387,723 | 398,676 | 411,700 | 3.80 | 2.85 | 2.82 | 3.27 |
| Widows' Pension | 2,098 | 1,778 | 1,415 | 1,079 | 813 | (15.25) | (20.42) | (23.75) | (24.65) |
| Income Support Recipients | 81,525 | 90,208 | 86,174 | 87,395 | 89,224 | 10.65 | (4.47) | 1.42 | 2.09 |
| Total | 3,165,157 | 3,210,035 | 3,275,931 | 3,384,625 | 3,473,996 | 1.42% | 2.05% | 3.32% | 2.64% |

(1) The population figures are as at March 31, calculated in July.

Table 1.2
Number of Registrations and Population Covered
by Method of Premium Collection and Subsidy Level
as at March 31, 2008⁽¹⁾

| Registration Status | Total | | Single | | Family | |
|---------------------------|------------------|------------------|----------------|----------------|----------------|------------------|
| | Registrations | Population | Registrations | Population | Registrations | Population |
| Non-Subsidized | | | | | | |
| Individual and Group | 1,264,679 | 2,663,383 | 607,657 | 607,657 | 657,022 | 2,055,726 |
| Partial Reduction | | | | | | |
| Individual and Group | 17,751 | 36,304 | 9,465 | 9,465 | 8,286 | 26,839 |
| Full Reduction | | | | | | |
| Individual and Group | 135,112 | 272,572 | 72,105 | 72,105 | 63,007 | 200,467 |
| Seniors | 279,446 | 411,700 | 151,794 | 151,794 | 127,652 | 259,906 |
| Widows' Pension | 772 | 813 | 738 | 738 | 34 | 75 |
| Income Support Recipients | 57,996 | 89,224 | 43,054 | 43,054 | 14,942 | 46,170 |
| Subtotal | 473,326 | 774,309 | 267,691 | 267,691 | 205,635 | 506,618 |
| Total | 1,755,756 | 3,473,996 | 884,813 | 884,813 | 870,943 | 2,589,183 |

(1) The population figures are as at March 31, calculated in July

Table 1.3
Distribution of Population by Age and Gender
as at March 31, 2004, 2005, 2006, 2007 and 2008⁽¹⁾

| Age Group \ Gender | Total | | | | | Percentage Change | | | |
|-----------------------|------------------|------------------|------------------|------------------|------------------|-------------------|---------------|---------------|---------------|
| | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 | 2005/ 2004 | 2006/ 2005 | 2007/ 2006 | 2008/ 2007 |
| Under 1 | 40,155 | 40,517 | 42,345 | 46,276 | 48,991 | 0.90 | 4.51 | 9.28 | 5.87 |
| 1 - 4 | 155,949 | 158,354 | 163,440 | 171,756 | 179,252 | 1.54 | 3.21 | 5.09 | 4.36 |
| 5 - 9 | 208,723 | 206,883 | 206,546 | 209,644 | 212,480 | (0.88) | (0.16) | 1.50 | 1.35 |
| 10 - 14 | 229,393 | 227,377 | 226,653 | 227,270 | 226,400 | (0.88) | (0.32) | 0.27 | (0.38) |
| 15 - 19 | 233,259 | 236,176 | 238,690 | 242,793 | 245,327 | 1.25 | 1.06 | 1.72 | 1.04 |
| 20 - 24 | 233,727 | 237,132 | 242,791 | 253,204 | 257,848 | 1.46 | 2.39 | 4.29 | 1.83 |
| 25 - 29 | 227,029 | 231,404 | 237,671 | 251,514 | 265,300 | 1.93 | 2.71 | 5.82 | 5.48 |
| 30 - 34 | 229,807 | 230,953 | 233,747 | 243,674 | 252,759 | 0.50 | 1.21 | 4.25 | 3.73 |
| 35 - 39 | 238,698 | 234,910 | 238,786 | 247,224 | 253,676 | (1.59) | 1.65 | 3.53 | 2.61 |
| 40 - 44 | 275,902 | 273,916 | 268,707 | 266,877 | 262,568 | (0.72) | (1.90) | (0.68) | (1.61) |
| 45 - 49 | 262,678 | 268,455 | 273,737 | 280,346 | 285,348 | 2.20 | 1.97 | 2.41 | 1.78 |
| 50 - 54 | 211,392 | 221,753 | 234,312 | 247,449 | 258,358 | 4.90 | 5.66 | 5.61 | 4.41 |
| 55 - 59 | 167,091 | 176,968 | 187,239 | 193,283 | 199,725 | 5.91 | 5.80 | 3.23 | 3.33 |
| 60 - 64 | 120,634 | 126,021 | 131,377 | 142,609 | 153,512 | 4.47 | 4.25 | 8.55 | 7.65 |
| 65 - 69 | 96,580 | 98,603 | 101,780 | 106,016 | 110,832 | 2.09 | 3.22 | 4.16 | 4.54 |
| 70 - 74 | 84,554 | 85,401 | 86,193 | 87,008 | 88,523 | 1.00 | 0.93 | 0.95 | 1.74 |
| 75 - 79 | 65,960 | 68,194 | 70,705 | 72,662 | 74,087 | 3.39 | 3.68 | 2.77 | 1.96 |
| 80 - 84 | 46,616 | 47,789 | 49,303 | 50,361 | 51,986 | 2.52 | 3.17 | 2.15 | 3.23 |
| 85 & Older | 37,010 | 39,229 | 41,909 | 44,659 | 47,024 | 6.00 | 6.83 | 6.56 | 5.30 |
| Total | 3,165,157 | 3,210,035 | 3,275,931 | 3,384,625 | 3,473,996 | 1.42% | 2.05% | 3.32% | 2.64% |

(1) The population figures are as at March 31, calculated in July

Continued...

Did You Know?

Alberta has one of the youngest populations in Canada. Median age 36.0 years compared to 39.5 for Canada.

Source: Statistics Canada

Table 1.3
Distribution of Population by Age and Gender
as at March 31, 2004, 2005, 2006, 2007 and 2008⁽¹⁾

| Age Group | Gender | Male | | | | | Percentage Change | | | |
|-----------------------|--------|------------------|------------------|------------------|------------------|------------------|-------------------|---------------|---------------|---------------|
| | | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 | 2005/ 2004 | 2006/ 2005 | 2007/ 2006 | 2008/ 2007 |
| Under 1 | | 20,597 | 20,741 | 21,556 | 23,618 | 24,963 | 0.70 | 3.93 | 9.57 | 5.69 |
| 1 - 4 | | 79,605 | 81,007 | 83,574 | 87,778 | 91,612 | 1.76 | 3.17 | 5.03 | 4.37 |
| 5 - 9 | | 107,270 | 106,202 | 106,094 | 107,403 | 108,758 | (1.00) | (0.10) | 1.23 | 1.26 |
| 10 - 14 | | 117,703 | 116,636 | 116,341 | 116,940 | 116,667 | (0.91) | (0.25) | 0.51 | (0.23) |
| 15 - 19 | | 119,350 | 120,870 | 122,026 | 124,212 | 125,223 | 1.27 | 0.96 | 1.79 | 0.81 |
| 20 - 24 | | 117,667 | 119,289 | 121,720 | 126,997 | 128,890 | 1.38 | 2.04 | 4.34 | 1.49 |
| 25 - 29 | | 113,981 | 115,598 | 117,919 | 124,490 | 131,208 | 1.42 | 2.01 | 5.57 | 5.40 |
| 30 - 34 | | 115,502 | 115,972 | 116,990 | 121,898 | 126,792 | 0.41 | 0.88 | 4.20 | 4.01 |
| 35 - 39 | | 118,848 | 117,042 | 118,965 | 123,969 | 127,716 | (1.52) | 1.64 | 4.21 | 3.02 |
| 40 - 44 | | 137,440 | 135,808 | 133,290 | 133,002 | 131,445 | (1.19) | (1.85) | (0.22) | (1.17) |
| 45 - 49 | | 133,278 | 135,787 | 137,874 | 140,836 | 143,055 | 1.88 | 1.54 | 2.15 | 1.58 |
| 50 - 54 | | 107,482 | 112,824 | 118,972 | 125,810 | 131,287 | 4.97 | 5.45 | 5.75 | 4.35 |
| 55 - 59 | | 84,284 | 89,352 | 94,601 | 97,792 | 101,423 | 6.01 | 5.87 | 3.37 | 3.71 |
| 60 - 64 | | 60,458 | 63,213 | 65,756 | 71,403 | 76,886 | 4.56 | 4.02 | 8.59 | 7.68 |
| 65 - 69 | | 47,409 | 48,495 | 50,175 | 52,273 | 54,753 | 2.29 | 3.46 | 4.18 | 4.74 |
| 70 - 74 | | 40,746 | 41,166 | 41,539 | 41,906 | 42,657 | 1.03 | 0.91 | 0.88 | 1.79 |
| 75 - 79 | | 29,533 | 30,893 | 32,296 | 33,474 | 34,240 | 4.61 | 4.54 | 3.65 | 2.29 |
| 80 - 84 | | 18,292 | 18,920 | 19,771 | 20,516 | 21,528 | 3.43 | 4.50 | 3.77 | 4.93 |
| 85 & Older | | 11,817 | 12,555 | 13,490 | 14,475 | 15,355 | 6.25 | 7.45 | 7.30 | 6.08 |
| Total | | 1,581,262 | 1,602,370 | 1,632,949 | 1,688,792 | 1,734,458 | 1.33% | 1.91% | 3.42% | 2.70% |

(1) The population figures are as at March 31, calculated in July.

Continued...

Table 1.3
Distribution of Population by Age and Gender
as at March 31, 2004, 2005, 2006, 2007 and 2008⁽¹⁾

| Gender Age Group | Female | | | | | Percentage Change | | | |
|------------------------|------------------|------------------|------------------|------------------|------------------|-------------------|---------------|---------------|---------------|
| | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 | 2005/ 2004 | 2006/ 2005 | 2007/ 2006 | 2008/ 2007 |
| Under 1 | 19,558 | 19,776 | 20,789 | 22,658 | 24,028 | 1.11 | 5.12 | 8.99 | 6.05 |
| 1 - 4 | 76,344 | 77,347 | 79,866 | 83,978 | 87,640 | 1.31 | 3.26 | 5.15 | 4.36 |
| 5 - 9 | 101,453 | 100,681 | 100,452 | 102,241 | 103,722 | (0.76) | (0.23) | 1.78 | 1.45 |
| 10 - 14 | 111,690 | 110,741 | 110,312 | 110,330 | 109,733 | (0.85) | (0.39) | 0.02 | (0.54) |
| 15 - 19 | 113,909 | 115,306 | 116,664 | 118,581 | 120,104 | 1.23 | 1.18 | 1.64 | 1.28 |
| 20 - 24 | 116,060 | 117,843 | 121,071 | 126,207 | 128,958 | 1.54 | 2.74 | 4.24 | 2.18 |
| 25 - 29 | 113,048 | 115,806 | 119,752 | 127,024 | 134,092 | 2.44 | 3.41 | 6.07 | 5.56 |
| 30 - 34 | 114,305 | 114,981 | 116,757 | 121,776 | 125,967 | 0.59 | 1.54 | 4.30 | 3.44 |
| 35 - 39 | 119,850 | 117,868 | 119,821 | 123,255 | 125,960 | (1.65) | 1.66 | 2.87 | 2.19 |
| 40 - 44 | 138,462 | 138,108 | 135,417 | 133,875 | 131,123 | (0.26) | (1.95) | (1.14) | (2.06) |
| 45 - 49 | 129,400 | 132,668 | 135,863 | 139,510 | 142,293 | 2.53 | 2.41 | 2.68 | 1.99 |
| 50 - 54 | 103,910 | 108,929 | 115,340 | 121,639 | 127,071 | 4.83 | 5.89 | 5.46 | 4.47 |
| 55 - 59 | 82,807 | 87,616 | 92,638 | 95,491 | 98,302 | 5.81 | 5.73 | 3.08 | 2.94 |
| 60 - 64 | 60,176 | 62,808 | 65,621 | 71,206 | 76,626 | 4.37 | 4.48 | 8.51 | 7.61 |
| 65 - 69 | 49,171 | 50,108 | 51,605 | 53,743 | 56,079 | 1.91 | 2.99 | 4.14 | 4.35 |
| 70 - 74 | 43,808 | 44,235 | 44,654 | 45,102 | 45,866 | 0.97 | 0.95 | 1.00 | 1.69 |
| 75 - 79 | 36,427 | 37,301 | 38,409 | 39,188 | 39,847 | 2.40 | 2.97 | 2.03 | 1.68 |
| 80 - 84 | 28,324 | 28,869 | 29,532 | 29,845 | 30,458 | 1.92 | 2.30 | 1.06 | 2.05 |
| 85 & Older | 25,193 | 26,674 | 28,419 | 30,184 | 31,669 | 5.88 | 6.54 | 6.21 | 4.92 |
| Total | 1,583,895 | 1,607,665 | 1,642,982 | 1,695,833 | 1,739,538 | 1.50% | 2.20% | 3.22% | 2.58% |

(1) The population figures are as at March 31, calculated in July.

Section 2: Basic Health Services (Physicians and Allied Health Practitioners)

Summary

The Alberta Health Care Insurance Plan (AHCIP) provides Albertans with coverage for basic health services. These include insured services provided by physicians and dentists/oral surgeons, as well as some services provided by podiatrists, optometrists and chiropractors. Alberta practitioners receive fee-for-service payments and/or are paid through Alternate Relationship Plans (ARP). See Table 2.17 for information about ARPs.

In this section, data are primarily for fee-for-service payments. Data are organized by practitioner specialty and type of service, by patient age and gender, and by the percentage of change in schedules of benefits. Individual schedules of benefits provide details about services and fee-for-service rates payable by the AHCIP. Unless otherwise noted, pathology services are included in this fee-for-service data. ARP and Primary Care Network (PCN) data are reported separately in Tables 2.17 and 2.21.

Highlights

- In Alberta, 6,058 physicians and 1,602 allied practitioners received fee-for-service payments from the AHCIP during 2007/2008.
- The physician to population ratio for physicians (excluding pathologists) who submitted fee-for-service claims remained constant at 1.7 per 1000 patients.
- Of the 3,473,996 Albertans registered for coverage with the AHCIP, 84 per cent (2,911,621 people) received at least one fee-for-service physician service during 2007/2008.
 - A total of 70 per cent of these patients received fee-for-service physician services valued at \$500 or less.
 - 15 per cent of these patients received fee-for-service physician services valued at more than \$1,000. Payments for these patients' services accounted for 60 per cent of all fee-for-service physician expenditures.
- Office visits (assessments) and consultations accounted for 47 per cent of the fee-for-service payments made to Alberta physicians in 2007/2008. These services accounted for 73 per cent of the fee-for-service payments made to general/family physicians.
- About 27 per cent of Alberta's population, 931,755 Albertans, obtained allied health services (services provided by dentists/oral surgeons, optometrists, podiatrists and chiropractors) in 2007/2008.
- Alberta Health and Wellness spent \$76,593,799 on optometry, podiatry and chiropractic services in 2007/2008. Coverage for these services is not required by the *Canada Health Act*.
- A total of \$12,734,895 was spent on optometry care for Alberta's children in 2007/2008.
- The AHCIP paid fee-for-service totaling \$1,799,224,796 to Alberta physicians and allied health practitioners in 2007/2008. This figure represents a 10 per cent increase compared to 2006/2007.

- In 2007/2008, the average total fee-for-service payment per Alberta physician was \$283,710 (7 per cent higher than it was in 2006/2007). This brought the median payment to \$233,610 (a 7 per cent increase compared to 2006/2007).
- A total of 748 physicians each received more than \$500,000 in fee-for-service payments in 2007/2008. This represents an increase of 145 physicians compared to 2006/2007. Of the 748 physicians, 159 were general/family physicians, an increase of 58 physicians over 2006/2007.
- A total of 150 physicians each received more than \$1 million in fee-for-service payments in 2007/2008. Twenty three (23) of the 150 physicians received more than \$2 million.
- In 2007/2008, a total of 1,029 physicians participated in ARPs. A total of \$147,163,837 was spent on ARP expenditures.
- As of March 31, 2008, 26 PCNs were operating in nine health regions. These 26 PCNs involve a total of 1,519 physicians who provide services to 1,699,374 patients.

Charts and Figures

The following chart outlines fee-for-service payments made to Alberta practitioners in 2007/2008.

| 2007/2008 Fee-For-Service Payments and Percentage Change | | |
|---|---|--|
| Practitioner Type | Overall Fee-For-Service Payments | Percentage Change from 2006/2007 to 2007/2008 |
| Physicians* | \$1,718,717,023 | 10.31 |
| Dentists/Oral Surgeons | 3,913,975 | 7.61 |
| Chiropractors | 45,711,999 | 5.13 |
| Optometrists | 22,638,799 | 14.30 |
| Podiatrists | 8,243,000 | 4.01 |
| Allied Practitioner Sub-total | 80,507,773 | 7.56 |
| Total | \$1,799,224,796 | 10.18 |

*\$5.5 million of the overall payments made by the AHCIP to physicians were for pathology services (see Explanatory Notes).

The following chart outlines the number of Alberta practitioners who submitted fee-for-service claims to the AHCIP in 2007/2008.

| 2007/2008 Practitioners Who Submitted Fee-For-Service Claims and Percentage Change | | |
|---|--------------------------------|--|
| Practitioner Type | Number of Practitioners | Percentage Change from 2006/2007 to 2007/2008 |
| Physicians | 6,058 | 3.56 |
| Dentists/Oral Surgeons | 207 | (5.91) |
| Chiropractors | 906 | 1.80 |
| Optometrists | 434 | 9.32 |
| Podiatrists | 55 | 1.85 |
| Total | 7,660 | 3.36 |

Figure 2
Average Fee-For-Service Payments per Albertan
to Physicians for Basic Health Services
by Age and Gender,
for the Fiscal Year April 1, 2007 to March 31, 2008

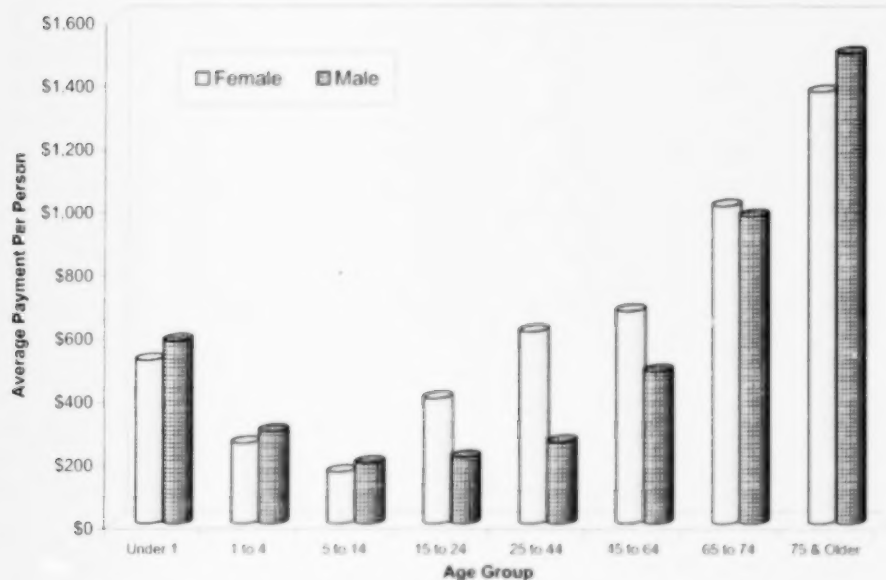
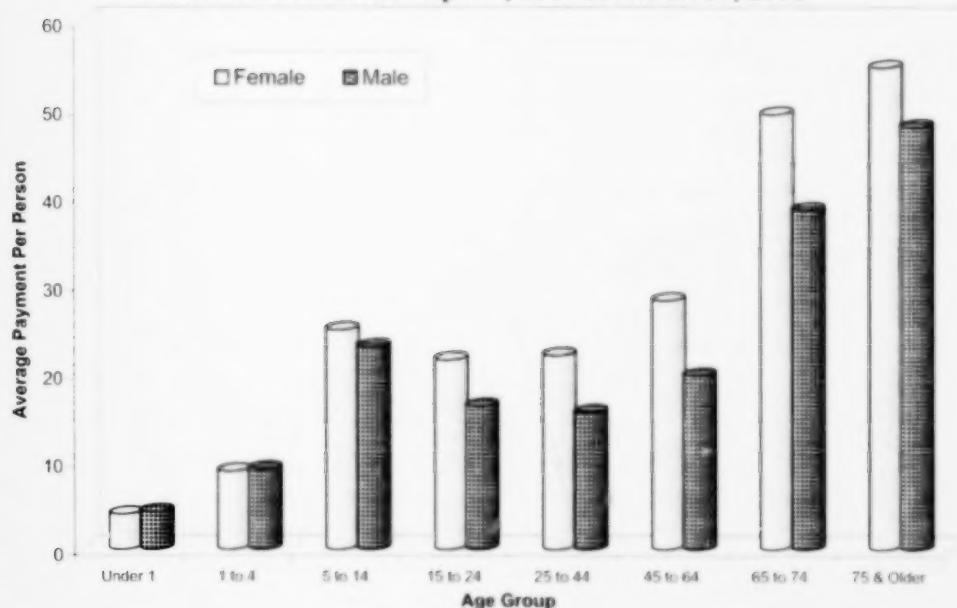


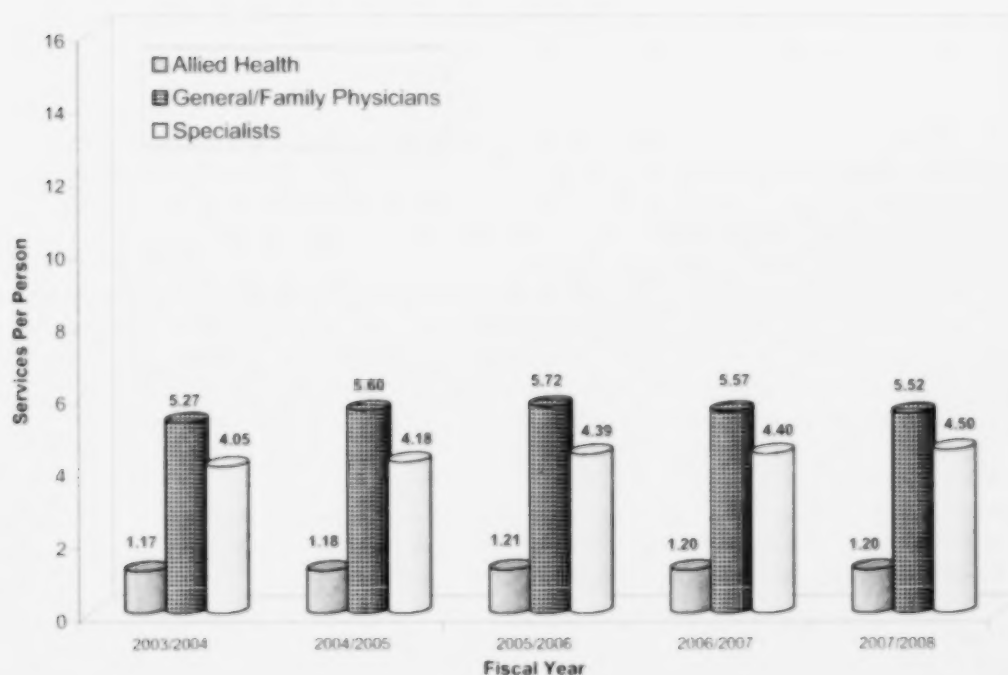
Figure 3
Average Fee-For-Service Payments per Albertan
to Allied Practitioners for Basic Health Services
by Age and Gender,
for the Fiscal Year April 1, 2007 to March 31, 2008



The following chart highlights the average fee-for-service cost per patient, by practitioner type. The total average cost per patient in 2007/2008 increased by 8 per cent over the previous year's cost.

| 2007/2008 Fee-For-Service Cost Per Patient By Practitioner Type and Percentage Change | | |
|--|---|--|
| Practitioner Type | Average Fee-For-Service Cost/Patient | Percentage Change from 2006/2007 to 2007/2008 |
| Physicians | \$590.30 | 7.92 |
| Dentists/Oral Surgeons | 346.31 | 5.83 |
| Chiropractors | 91.99 | 2.21 |
| Optometrists | 53.78 | 4.67 |
| Podiatrists | 86.85 | 3.26 |
| Total | \$596.31 | 7.66 |

Figure 4
Average Number of Basic Health Services per Person
for the Fiscal Years Ended March 31, 2004 to March 31, 2008⁽¹⁾



(1) The data excludes pathologists. See Explanatory Notes for more details.

Explanatory Notes

Expenditure Location

Unless stated otherwise, the tables in Section 2 represent Alberta practitioner data. Hospital and non-hospital surgical facility costs are not reported in this Statistical Supplement, with the exception of select out-of-country hospital services, which are reported in Tables 2.18 to 2.20.

Pathology Services

The regional health authorities pay for most laboratory services. A few select pathology services, such as minor consultations, electrocardiograms (technical) and skin tests, are still paid for by the Alberta Health Care Insurance Plan (AHCIP).

Pathologists often submit fee-for-service claims through organizations rather than as individuals, so data about them is not directly comparable to that of other physicians. These statistics are listed separately whenever possible to allow for year-over-year comparisons.

Payments Do Not Reflect Income

These statistics cannot be used as an accurate measure of a practitioner's personal income, because:

- some practitioners receive income from other sources (e.g. Workers' Compensation Board, third party medicals, and for services not covered by the AHCIP);
- both full-time and part-time practitioners are included in the statistics;
- salaried positions and contractual arrangements with regional health authorities or private employers are not included;
- payments for services rendered to non-Albertans are not included; and
- the figures quoted are payments from which practitioners pay business expenses, such as office and staff expenses.

Under special circumstances, physicians can claim and be paid for services provided by medical residents and nurses they supervise, and for diagnostic services provided by technicians.

Physician Data

Data in this section include all Alberta physicians who had fee-for-service payments of one dollar or more in 2007/2008. When physicians have multiple specialties, they have been counted in the specialty where they received the highest fee-for-service payments.

Alternate Relationship Plan (ARP) data are reported separately from fee-for-service data (Table 2.17).

Manual payments totaling \$17,461,049 made to Alberta physicians for the service period October 1, 2003 to March 31, 2004, are not included in the data. These payments were made to address the 2.7 per cent fee increase negotiated through the Master Agreement and implemented retroactively to October 1, 2003.

Manual payments totaling \$35,447,056 made to Alberta physicians for the service period October 1, 2006 to March 31, 2007, are not included in the data. These payments were made to address the 4.5 per cent fee increase negotiated through the Master Agreement and implemented retroactively to October 1, 2006. Manual payments totaling \$37,704,829 made to Alberta physicians for the service period April 1, 2007 to June 30, 2007 are not included in the data. These payments were made to address the 9.2 per cent fee increase negotiated through the Master Agreement implemented retroactively to April 1, 2007.

Clinical Stabilization Initiative (CSI) is part of the Amending Agreement to the Tri-Lateral Master Agreement for physicians. Effective September 1, 2007, CSI was established to address three specific emergent issues:

- Business Cost Program (BCP) - addresses the rising cost of medical practices in Alberta
- Rural Remote Northern Program - addresses the challenges of recruiting physicians to live and practice in rural, remote and northern areas of the province
- Communities in Crisis - addresses the challenges of recruiting physicians to live and practice in communities in crisis.

Manual payments for CSI, totaling \$53,135,414 made to Alberta physicians for the service period September 1, 2007 to March 31, 2008, are not included in the data.

Practitioner

Practitioner refers to physicians and allied health practitioners (dentists/oral surgeons, chiropractors, optometrists and podiatrists) who received fee-for-service payments from the AHCIP for basic health services.

Reporting Dates

Data are reported on a date-of-service rather than a date-of-payment basis. Practitioners have 180 days from the date-of-service to submit claims to the AHCIP for payment.

Number of Services

Some health services listed in the schedules of benefits are paid based on time units. Where applicable, the number of services reported will be the number of time units paid.

Types of Service

The types of services reported in the fee-for-service payment tables are based on the health service codes from the relevant schedules of benefits and include all payments made for the service regardless of the practitioner's role.

Chiropractic Services

During the 2007/2008 year, the maximum benefit paid by the AHCIP was \$14.00 for a chiropractic visit and \$23.19 for an x-ray, with an annual patient limit of \$200.

Optometry Services

Alberta children (18 years of age and younger) and residents who are 65 years of age and older are entitled to one complete eye exam, one partial eye exam, and one diagnostic test each year. Additional services are paid when specific medical conditions exist or if a physician refers a patient in these age groups to an optometrist. Effective October 1, 2007, coverage was expanded to include certain medically necessary eye care services for 19 to 64 year olds. Routine eye exams for Albertans aged 19 to 64 years of age are not covered by the AHCIP.

Manual payments totaling \$791,248 made to Alberta optometrists for the service period April 1, 2006 to March 31, 2007 are not included in the data. These payments were made to address the 4.0 per cent increase negotiated through the Master Agreement and implemented retroactively to April 1, 2006.

Manual payments totaling \$911,581 made to Alberta optometrists for the service period April 1, 2007 to September 30, 2007 are not included in the data. These payments were made to address the 8.7 per cent increase negotiated through the Master Agreement and implemented retroactively to April 1, 2007.

Podiatry Services

Podiatry services covered by the AHCIP are paid at a set rate per service (as detailed in the Schedule of Podiatry Benefits), with a maximum annual benefit per patient of \$250.

On June 1, 2006, a new Schedule of Podiatric Surgery Benefits was implemented. Services under the new schedule are fully covered by the AHCIP, if the services are provided by a podiatrist in a hospital or non-hospital surgical facility under contract to a regional health authority.

Manual payments totaling \$32,505 made to Alberta podiatrists for the period January 1 to May 31, 2006 are not included in the data. These payments were made in relation to an agreement between Alberta Health and Wellness and the Alberta Podiatry Association to support podiatrists with credentials from the American Board of Podiatric Surgery or credentials from the American Board of Multiple Specialists in Podiatry and who have been granted hospital privileges by a regional health authority.

Did You Know?

84% of Albertans received at least one fee-for-service physician service in 2007/2008. 15% of these patients received physician services valued at more than \$1,000. Payments for these patients accounted for 60% of all fee-for-service physician expenditures.

Table 2.1
Medical and Allied Practitioners: Selected Indicators
for the Service Years Ended March 31, 2004 to March 31, 2008

| Indicators | 2003/2004 | 2004/2005 | 2005/2006 | 2006/2007 | 2007/2008 |
|--|-----------------|-----------------|-----------------|-----------------|-----------------|
| REGISTRATIONS | | | | | |
| Population Covered | 3,165,157 | 3,210,035 | 3,275,931 | 3,384,625 | 3,473,996 |
| Number of Discrete Physician Patients ⁽¹⁾ | 2,689,453 | 2,728,340 | 2,789,879 | 2,848,553 | 2,911,621 |
| Number of Discrete Patients per Physician | 501 | 496 | 500 | 487 | 481 |
| OVERALL PHYSICIAN SUMMARY | | | | | |
| Number of Physician Services Provided | 30,044,400 | 31,683,660 | 33,428,098 | 34,031,123 | 35,054,154 |
| Number of Physicians | 5,363 | 5,501 | 5,585 | 5,850 | 6,058 |
| Number of Physicians per 1,000 Persons | 1.69 | 1.71 | 1.70 | 1.73 | 1.74 |
| Number of Services per Physician | 5,602 | 5,760 | 5,985 | 5,817 | 5,786 |
| Number of Services per 1,000 Persons | 9.492 | 9.870 | 10.204 | 10.055 | 10.090 |
| Total Physician Payments | \$1,272,779,982 | \$1,348,724,184 | \$1,472,634,054 | \$1,558,128,163 | \$1,718,717,023 |
| Physician Payment per 1,000 Persons | \$402,122 | \$420,159 | \$449,531 | \$460,355 | \$494,738 |
| Average Payment per Physician | \$237,326 | \$245,178 | \$263,677 | \$266,347 | \$283,710 |
| PHYSICIAN SUMMARY EXCLUDING PATHOLOGY | | | | | |
| Number of Physician Services Provided | 29,790,613 | 31,404,205 | 33,106,838 | 33,750,122 | 34,798,954 |
| Number of Physicians | 5,343 | 5,481 | 5,562 | 5,829 | 6,038 |
| Number of Physicians per 1,000 Persons | 1.69 | 1.71 | 1.70 | 1.72 | 1.74 |
| Number of Services per Physician | 5,576 | 5,730 | 5,952 | 5,790 | 5,763 |
| Number of Services per 1,000 Persons | 9.412 | 9.783 | 10.106 | 9.972 | 10.017 |
| Total Physician Payments | \$1,268,402,472 | \$1,343,843,049 | \$1,466,988,776 | \$1,552,727,236 | \$1,713,185,942 |
| Physician Payment per 1,000 Persons | \$400,739 | \$418,638 | \$447,808 | \$458,759 | \$493,146 |
| Average Payment per Physician | \$237,395 | \$245,182 | \$263,752 | \$266,380 | \$283,734 |
| ALLIED PRACTITIONER SUMMARY | | | | | |
| Number of Allied Services Provided | 3,777,986 | 3,796,562 | 3,978,369 | 4,050,293 | 4,157,757 |
| Number of Allied Practitioners | 1,443 | 1,478 | 1,523 | 1,561 | 1,602 |
| Number of Allied Practitioners per 1,000 Persons | 0.46 | 0.46 | 0.46 | 0.46 | 0.46 |
| Number of Services per Allied Practitioner | 2,618 | 2,569 | 2,612 | 2,595 | 2,595 |
| Number of Discrete Allied Patients ⁽²⁾ | 807,961 | 820,959 | 863,748 | 889,943 | 931,755 |
| Number of Discrete Patients per Allied Practitioner | 560 | 555 | 567 | 570 | 582 |
| Total Payments to Allied Practitioners | \$65,271,664 | \$68,398,242 | \$72,560,363 | \$74,846,593 | \$80,507,774 |
| Allied Practitioner Payment per 1,000 Persons | \$20,622 | \$21,308 | \$22,150 | \$22,114 | \$23,174 |
| Average Payment per Allied Practitioner | \$45,233 | \$46,278 | \$47,643 | \$47,948 | \$50,255 |

Note: This table reflects fee-for-service data only.

(1) Number of Discrete Physician Patients represents the actual count of patients receiving at least one service from a physician.

(2) Number of Discrete Allied Patients represents the actual count of patients receiving at least one service from an allied practitioner.

Continued

Table 2.1
Medical and Allied Practitioners: Selected Indicators
for the Service Years Ended March 31, 2004 to March 31, 2008

| Indicators | Percentage Change | | | |
|--|-------------------|-----------|-----------|-----------|
| | 2005/2004 | 2006/2005 | 2007/2006 | 2008/2007 |
| REGISTRATIONS | | | | |
| Population Covered | 1.42% | 2.05% | 3.32% | 2.64% |
| Number of Discrete Physician Patients ⁽¹⁾ | 1.45 | 2.26 | 2.10 | 2.21 |
| Number of Discrete Patients per Physician | (1.00) | 0.81 | (2.60) | (1.23) |
| OVERALL PHYSICIAN SUMMARY | | | | |
| Number of Physician Services Provided | 5.46 | 5.51 | 1.80 | 3.01 |
| Number of Physicians | 2.57 | 1.53 | 4.74 | 3.56 |
| Number of Physicians per 1,000 Persons | 1.18 | (0.58) | 1.76 | 0.58 |
| Number of Services per Physician | 2.81 | 3.92 | (2.81) | (0.53) |
| Number of Services per 1,000 Persons | 3.98 | 3.38 | (1.47) | 0.36 |
| Total Physician Payments | 5.97 | 9.19 | 5.81 | 10.31 |
| Physician Payment per 1,000 Persons | 4.40 | 6.99 | 2.41 | 7.47 |
| Average Payment per Physician | 3.31 | 7.54 | 1.01 | 6.82 |
| PHYSICIAN SUMMARY EXCLUDING PATHOLOGY | | | | |
| Number of Physician Services Provided | 5.42 | 5.42 | 1.94 | 3.11 |
| Number of Physicians | 2.58 | 1.48 | 4.80 | 3.59 |
| Number of Physicians per 1,000 Persons | 1.18 | (0.58) | 1.18 | 1.16 |
| Number of Services per Physician | 2.76 | 3.89 | (2.73) | (0.46) |
| Number of Services per 1,000 Persons | 3.94 | 3.30 | (1.33) | 0.46 |
| Total Physician Payments | 5.95 | 9.16 | 5.84 | 10.33 |
| Physician Payment per 1,000 Persons | 4.47 | 6.97 | 2.45 | 7.50 |
| Average Payment per Physician | 3.28 | 7.57 | 1.00 | 6.51 |
| ALLIED PRACTITIONER SUMMARY | | | | |
| Number of Allied Services Provided | 0.49 | 4.79 | 1.81 | 2.65 |
| Number of Allied Practitioners | 2.43 | 3.04 | 2.50 | 2.63 |
| Number of Allied Practitioners per 1,000 Persons | 0.00 | 0.00 | 0.00 | 0.00 |
| Number of Services per Allied Practitioner | (1.89) | 1.69 | (0.67) | 0.03 |
| Number of Discrete Allied Patients ⁽²⁾ | 1.61 | 5.21 | 3.03 | 4.70 |
| Number of Discrete Patients per Allied Practitioner | (0.80) | 2.10 | 0.52 | 2.02 |
| Total Payments to Allied Practitioners | 4.79 | 6.09 | 3.15 | 7.56 |
| Allied Practitioner Payment per 1,000 Persons | 3.33 | 3.95 | (0.16) | 4.80 |
| Average Payment per Allied Practitioner | 2.31 | 2.95 | 0.64 | 4.81 |

Note: This table reflects fee-for-service data only.

(1) Number of Discrete Physician Patients represents the actual count of patients receiving at least one service from a physician.

(2) Number of Discrete Allied Patients represents the actual count of patients receiving at least one service from an allied practitioner.

Table 2.1A
Number of Services and Total Payments
to Allied Practitioners by Service Category Code
for the Service Year April 1, 2007 to March 31, 2008

| Practitioner Type | Service Category Code | Number of Services | Total Payments |
|------------------------|-----------------------|--------------------|---------------------|
| Chiropractors | Visit | 3,304,437 | 45,150,344 |
| | Test (x-ray) | 24,686 | 561,655 |
| Dentists/Oral Surgeons | Procedures | 11,294 | 3,519,927 |
| | Visit | 5,475 | 394,048 |
| Optometrists | Visit | 518,584 | 22,638,799 |
| Podiatrists | Procedures | 79,833 | 2,345,985 |
| | Test (x-ray) | 12,125 | 175,769 |
| | Visit | 201,323 | 5,721,246 |
| Total | | 4,157,757 | \$80,507,774 |

Note: This table reflects fee-for-service data only.

Table 2.2
Number of Physicians and Average Payments to Physicians within their Age Group
for the Service Years Ended March 31, 2004 to March 31, 2008

| Physician Age Group | Number of Physicians | | | | | Percentage Change | | | |
|---------------------|----------------------|---------------|---------------|---------------|---------------|-------------------|---------------|---------------|---------------|
| | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 | 2005/ 2004 | 2006/ 2005 | 2007/ 2006 | 2008/ 2007 |
| Under 30 | 104 | 108 | 99 | 114 | 103 | 3.85 | (8.33) | 15.15 | (9.65) |
| 30 - 34 | 631 | 635 | 620 | 639 | 646 | 0.63 | (2.36) | 3.06 | 1.10 |
| 35 - 39 | 808 | 813 | 846 | 896 | 964 | 0.62 | 4.06 | 5.91 | 7.59 |
| 40 - 44 | 824 | 816 | 846 | 879 | 869 | (0.97) | 3.68 | 3.90 | (1.14) |
| 45 - 49 | 964 | 954 | 911 | 911 | 878 | (1.04) | (4.51) | 0.00 | (3.62) |
| 50 - 54 | 794 | 830 | 850 | 897 | 991 | 4.53 | 2.41 | 5.53 | 10.48 |
| 55 - 59 | 518 | 595 | 626 | 672 | 692 | 14.86 | 5.21 | 7.35 | 2.98 |
| 60 - 64 | 314 | 335 | 355 | 386 | 421 | 6.69 | 5.97 | 8.73 | 9.07 |
| 65 & Over | 406 | 415 | 432 | 456 | 494 | 2.22 | 4.10 | 5.56 | 8.33 |
| Total | 5,363 | 5,501 | 5,585 | 5,850 | 6,058 | 2.57% | 1.53% | 4.74% | 3.56% |

| Physician Age Group | Average Payments | | | | | Percentage Change | | | |
|---------------------|------------------|------------------|------------------|------------------|------------------|-------------------|---------------|---------------|---------------|
| | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 | 2005/ 2004 | 2006/ 2005 | 2007/ 2006 | 2008/ 2007 |
| Under 30 | \$114,401 | \$132,000 | \$143,907 | \$127,203 | \$164,634 | 15.38 | 9.02 | (11.61) | 29.43 |
| 30 - 34 | 176,936 | 181,204 | 207,866 | 213,870 | 230,354 | 2.41 | 14.71 | 2.89 | 7.71 |
| 35 - 39 | 224,836 | 237,156 | 243,281 | 259,216 | 287,914 | 5.48 | 2.58 | 6.55 | 11.07 |
| 40 - 44 | 239,150 | 242,651 | 257,770 | 264,220 | 285,660 | 1.46 | 6.23 | 2.50 | 8.11 |
| 45 - 49 | 262,462 | 265,143 | 291,591 | 276,763 | 298,286 | 1.02 | 9.98 | (5.09) | 7.78 |
| 50 - 54 | 289,336 | 300,445 | 314,691 | 320,418 | 316,515 | 3.84 | 4.74 | 1.82 | (1.22) |
| 55 - 59 | 274,110 | 283,807 | 304,750 | 318,221 | 333,915 | 3.54 | 7.38 | 4.42 | 4.93 |
| 60 - 64 | 255,467 | 263,155 | 290,651 | 271,229 | 294,671 | 3.01 | 10.45 | (6.68) | 8.64 |
| 65 & Over | 161,471 | 166,881 | 181,806 | 185,028 | 195,297 | 3.35 | 8.94 | 1.77 | 5.55 |
| Total | \$237,326 | \$245,178 | \$263,677 | \$266,347 | \$283,710 | 3.31% | 7.54% | 1.01% | 6.52% |

Note: This table reflects fee-for-service data only.

Table 2.2A

**Number of Chiropractors and Average Payments to Chiropractors within their Age Group
for the Service Years Ended March 31, 2004 to March 31, 2008**

| Chiropractor Age Group | Number of Chiropractors | | | | | Percentage Change | | | |
|---------------------------|-------------------------|---------------|---------------|---------------|---------------|-------------------|---------------|---------------|---------------|
| | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 | 2005/ 2004 | 2006/ 2005 | 2007/ 2006 | 2008/ 2007 |
| Under 30 | 94 | 93 | 96 | 88 | 83 | (1.06) | 3.23 | (8.33) | (5.68) |
| 30 - 34 | 229 | 241 | 213 | 200 | 187 | 5.24 | (11.62) | (6.10) | (6.50) |
| 35 - 39 | 168 | 163 | 183 | 210 | 224 | (2.98) | 12.27 | 14.75 | 6.67 |
| 40 - 44 | 91 | 102 | 118 | 129 | 138 | 12.09 | 15.69 | 9.32 | 6.98 |
| 45 - 49 | 81 | 87 | 79 | 80 | 83 | 7.41 | (9.20) | 1.27 | 3.75 |
| 50 - 54 | 73 | 65 | 69 | 73 | 72 | (10.96) | 6.15 | 5.80 | (1.37) |
| 55 - 59 | 45 | 52 | 60 | 59 | 58 | 15.56 | 15.38 | (1.67) | (1.69) |
| 60 - 64 | 21 | 28 | 28 | 35 | 40 | 33.33 | 0.00 | 25.00 | 14.29 |
| 65 & Over | 14 | 13 | 15 | 16 | 21 | (7.14) | 15.38 | 6.67 | 31.25 |
| Total | 816 | 844 | 861 | 890 | 906 | 3.43% | 2.01% | 3.37% | 1.80% |

| Chiropractor Age Group | Average Payments | | | | | Percentage Change | | | |
|---------------------------|------------------|-----------------|-----------------|-----------------|-----------------|-------------------|---------------|---------------|---------------|
| | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 | 2005/ 2004 | 2006/ 2005 | 2007/ 2006 | 2008/ 2007 |
| Under 30 | \$24,323 | \$20,202 | \$24,671 | \$22,389 | \$28,443 | (16.94) | 22.12 | (9.25) | 27.04 |
| 30 - 34 | 37,890 | 39,005 | 39,256 | 40,178 | 38,893 | 2.94 | 0.64 | 2.35 | (3.20) |
| 35 - 39 | 51,311 | 50,384 | 49,555 | 50,733 | 51,461 | (1.81) | (1.65) | 2.38 | 1.44 |
| 40 - 44 | 52,171 | 48,566 | 53,041 | 52,600 | 57,024 | (6.91) | 9.21 | (0.83) | 8.41 |
| 45 - 49 | 69,103 | 68,348 | 64,608 | 63,030 | 60,623 | (1.09) | (5.47) | (2.44) | (3.82) |
| 50 - 54 | 60,154 | 60,024 | 64,870 | 62,234 | 66,577 | (0.22) | 8.07 | (4.06) | 6.98 |
| 55 - 59 | 59,960 | 61,627 | 59,162 | 57,465 | 56,593 | 2.78 | (4.00) | (2.87) | (1.52) |
| 60 - 64 | 49,554 | 52,438 | 53,789 | 54,637 | 57,229 | 5.01 | 2.58 | 1.58 | 4.74 |
| 65 & Over | 69,440 | 76,936 | 72,820 | 71,665 | 61,189 | 10.79 | (5.35) | (1.59) | (14.62) |
| Total | \$47,841 | \$47,353 | \$48,531 | \$48,854 | \$50,455 | -1.02% | 2.49% | 0.66% | 3.28% |

Note: This table reflects fee-for-service data only.

Table 2.2B

**Number of Dentists/Oral Surgeons and Average Payments to Dentists/Oral Surgeons
within their Age Group for the Service Years Ended March 31, 2004 to March 31, 2008**

| Dentist/Oral Surgeon Age Group | Number of Dentists/Oral Surgeons | | | | | Percentage Change | | | |
|--------------------------------|----------------------------------|---------------|---------------|---------------|---------------|-------------------|---------------|---------------|---------------|
| | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 | 2005/ 2004 | 2006/ 2005 | 2007/ 2006 | 2008/ 2007 |
| Under 30 | 7 | 11 | 6 | 4 | 4 | 57.14 | (45.45) | (33.33) | 0.00 |
| 30 - 34 | 18 | 16 | 22 | 28 | 19 | (11.11) | 37.50 | 27.27 | (32.14) |
| 35 - 39 | 45 | 38 | 33 | 27 | 30 | (15.56) | (13.16) | (18.18) | 11.11 |
| 40 - 44 | 36 | 34 | 43 | 38 | 41 | (5.56) | 26.47 | (11.63) | 7.89 |
| 45 - 49 | 39 | 40 | 41 | 41 | 36 | 2.56 | 2.50 | 0.00 | (12.20) |
| 50 - 54 | 32 | 33 | 34 | 36 | 32 | 3.13 | 3.03 | 5.88 | (11.11) |
| 55 - 59 | 20 | 23 | 31 | 24 | 24 | 15.00 | 34.78 | (22.58) | 0.00 |
| 60 - 64 | 12 | 12 | 13 | 13 | 16 | 0.00 | 8.33 | 0.00 | 23.08 |
| 65 & Over | 7 | 9 | 7 | 9 | 5 | 28.57 | (22.22) | 28.57 | (44.44) |
| Total | 216 | 216 | 230 | 220 | 207 | 0.00% | 6.48% | -4.35% | -5.91% |

| Dentist/Oral Surgeon Age Group | Average Payments | | | | | Percentage Change | | | |
|--------------------------------|------------------|-----------------|-----------------|-----------------|-----------------|-------------------|---------------|---------------|---------------|
| | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 | 2005/ 2004 | 2006/ 2005 | 2007/ 2006 | 2008/ 2007 |
| Under 30 | \$649 | \$894 | \$409 | \$609 | \$896 | 37.83 | (54.26) | 48.87 | 47.20 |
| 30 - 34 | 7,002 | 6,523 | 12,405 | 11,823 | 6,884 | (6.85) | 90.18 | (4.69) | (41.77) |
| 35 - 39 | 3,556 | 8,241 | 9,635 | 14,642 | 20,772 | 131.74 | 16.92 | 51.97 | 41.86 |
| 40 - 44 | 13,233 | 17,870 | 15,434 | 20,039 | 5,933 | 35.04 | (13.63) | 29.84 | (70.39) |
| 45 - 49 | 12,592 | 13,403 | 8,023 | 9,502 | 25,917 | 6.44 | (40.14) | 18.43 | 172.77 |
| 50 - 54 | 21,126 | 19,442 | 23,360 | 24,791 | 25,843 | (7.97) | 20.15 | 6.13 | 4.24 |
| 55 - 59 | 19,883 | 21,445 | 23,482 | 29,975 | 35,877 | 7.86 | 9.49 | 27.65 | 19.69 |
| 60 - 64 | 2,564 | 8,070 | 9,423 | 8,355 | 16,015 | 214.74 | 16.77 | (11.34) | 91.69 |
| 65 & Over | 5,934 | 4,547 | 6,485 | 4,097 | 7,181 | (23.38) | 42.64 | (36.83) | 75.27 |
| Total | \$11,130 | \$13,165 | \$14,243 | \$16,533 | \$18,908 | 18.28% | 8.19% | 16.07% | 14.37% |

Note: This table reflects fee-for-service data only.

Table 2.2C

**Number of Optometrists and Average Payments to Optometrists within their Age Group
for the Service Years Ended March 31, 2004 to March 31, 2008**

| Optometrist Age Group | Number of Optometrists | | | | | Percentage Change | | | |
|--------------------------|------------------------|---------------|---------------|---------------|---------------|-------------------|---------------|---------------|---------------|
| | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 | 2005/ 2004 | 2006/ 2005 | 2007/ 2006 | 2008/ 2007 |
| Under 30 | 47 | 53 | 50 | 56 | 68 | 12.77 | (5.66) | 12.00 | 21.43 |
| 30 - 34 | 86 | 84 | 86 | 81 | 91 | (2.33) | 2.38 | 2.33 | 3.41 |
| 35 - 39 | 48 | 55 | 68 | 71 | 85 | 14.58 | 23.64 | 4.41 | 19.72 |
| 40 - 44 | 31 | 32 | 29 | 33 | 38 | 3.23 | (9.38) | 13.79 | 15.15 |
| 45 - 49 | 45 | 39 | 38 | 35 | 30 | (13.33) | (2.56) | (7.89) | (14.29) |
| 50 - 54 | 39 | 38 | 40 | 40 | 41 | (2.56) | 5.26 | 0.00 | 2.50 |
| 55 - 59 | 37 | 33 | 33 | 31 | 32 | (10.81) | 0.00 | (6.06) | 3.23 |
| 60 - 64 | 14 | 21 | 25 | 27 | 28 | 50.00 | 19.05 | 8.00 | 3.70 |
| 65 & Over | 11 | 12 | 13 | 16 | 21 | 9.09 | 8.33 | 23.08 | 31.25 |
| Total | 358 | 367 | 382 | 397 | 434 | 2.51% | 4.09% | 3.93% | 9.32% |

| Optometrist Age Group | Average Payments | | | | | Percentage Change | | | |
|--------------------------|------------------|---------------|---------------|---------------|---------------|-------------------|---------------|---------------|---------------|
| | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 | 2005/ 2004 | 2006/ 2005 | 2007/ 2006 | 2008/ 2007 |
| Under 30 | \$41,668 | \$42,820 | \$45,386 | \$42,627 | \$40,371 | 2.76 | 5.99 | (6.08) | (5.29) |
| 30 - 34 | 49,791 | 53,587 | 54,855 | 51,149 | 57,050 | 7.62 | 2.37 | (6.76) | 11.54 |
| 35 - 39 | 40,707 | 48,626 | 50,262 | 48,556 | 51,717 | 19.45 | 3.36 | (3.39) | 6.51 |
| 40 - 44 | 48,266 | 52,114 | 56,267 | 55,264 | 52,610 | 7.97 | 7.97 | (1.78) | (4.80) |
| 45 - 49 | 53,726 | 59,031 | 59,075 | 53,860 | 58,176 | 9.87 | 0.07 | (8.83) | 8.01 |
| 50 - 54 | 48,510 | 54,248 | 58,574 | 64,237 | 69,394 | 11.83 | 7.98 | 9.67 | 8.03 |
| 55 - 59 | 49,964 | 50,339 | 50,975 | 44,879 | 48,554 | 0.75 | 1.26 | (11.96) | 8.19 |
| 60 - 64 | 39,342 | 48,318 | 61,726 | 50,453 | 55,926 | 22.82 | 27.75 | (18.26) | 10.85 |
| 65 & Over | 25,429 | 17,506 | 20,495 | 27,305 | 28,420 | (31.16) | 17.08 | 33.23 | 4.08 |
| Total | \$46,592 | \$50,034 | \$52,659 | \$49,885 | \$52,163 | 7.39% | 5.25% | -5.27% | 4.57% |

Note: This table reflects fee-for-service data only.

Table 2.2D
Number of Podiatrists and Average Payments to Podiatrists within their Age Group
for the Service Years Ended March 31, 2004 to March 31, 2008

| Podiatrist Age Group | Number of Podiatrists | | | | | Percentage Change | | | |
|----------------------|-----------------------|---------------|---------------|---------------|---------------|-------------------|---------------|---------------|---------------|
| | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 | 2005/ 2004 | 2006/ 2005 | 2007/ 2006 | 2008/ 2007 |
| Under 35 | 10 | 5 | 4 | 7 | 7 | (50.00) | (20.00) | 75.00 | 0.00 |
| 35 - 39 | 16 | 19 | 16 | 17 | 12 | 18.75 | (15.79) | 6.25 | (29.41) |
| 40 - 44 | 9 | 10 | 14 | 12 | 14 | 11.11 | 40.00 | (14.29) | 16.67 |
| 45 - 49 | 5 | 7 | 6 | 6 | 7 | 40.00 | (14.29) | 0.00 | 16.67 |
| 50 - 54 | 7 | 4 | 3 | 5 | 6 | (42.86) | (25.00) | 66.67 | 20.00 |
| 55 & Over | 6 | 6 | 7 | 7 | 9 | 0.00 | 16.67 | 0.00 | 28.57 |
| Total | 53 | 51 | 50 | 54 | 55 | -3.77% | -1.96% | 8.00% | 1.85% |

| Podiatrist Age Group | Average Payments | | | | | Percentage Change | | | |
|----------------------|------------------|---------------|---------------|---------------|---------------|-------------------|---------------|---------------|---------------|
| | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 | 2005/ 2004 | 2006/ 2005 | 2007/ 2006 | 2008/ 2007 |
| Under 35 | \$113,058 | \$123,458 | \$113,765 | \$85,084 | \$107,353 | 9.20 | (7.85) | (25.21) | 26.17 |
| 35 - 39 | 163,618 | 144,684 | 162,630 | 166,607 | 171,738 | (11.57) | 12.40 | 2.45 | 3.08 |
| 40 - 44 | 158,694 | 167,149 | 151,933 | 148,872 | 181,302 | 5.33 | (9.10) | (2.01) | 21.78 |
| 45 - 49 | 115,237 | 125,412 | 141,465 | 216,249 | 153,672 | 8.83 | 12.80 | 52.86 | (28.94) |
| 50 - 54 | 99,483 | 131,127 | 125,309 | 129,424 | 110,876 | 31.81 | (4.44) | 3.28 | (14.33) |
| 55 & Over | 116,652 | 130,995 | 139,162 | 140,330 | 127,943 | 12.30 | 6.23 | 0.84 | (8.83) |
| Total | \$134,890 | \$141,689 | \$147,661 | \$146,760 | \$149,873 | 5.04% | 4.21% | -0.61% | 2.12% |

Note: This table reflects fee-for-service data only.

Table 2.3
Distribution of Physician and Allied Practitioner Payments and Services per Patient
for the Service Year April 1, 2007 to March 31, 2008⁽¹⁾

| Practitioner Type | Total Payments | Number of Services | Average Cost per Service | Number of Discrete Patients ⁽²⁾ | Average Cost Per Discrete Patient | Average Number of Services Per Discrete Patient |
|---------------------------------|------------------------|--------------------|--------------------------|--|-----------------------------------|---|
| Physicians | \$1,718,717,023 | 35,054,154 | \$49.03 | 2,911,621 | \$590.30 | 12 |
| Dentists/Oral Surgeons | 3,913,975 | 16,769 | 233.41 | 11,302 | 346.31 | 1 |
| Chiropractors | 45,711,999 | 3,329,123 | 13.73 | 496,945 | 91.99 | 7 |
| Optometrists | 22,638,799 | 518,584 | 43.66 | 420,917 | 53.78 | 1 |
| Podiatrists | 8,243,000 | 293,281 | 28.11 | 94,911 | 86.85 | 3 |
| Total | \$1,799,224,796 | 39,211,911 | | 3,017,267 | | |
| Averages Based on Totals | | | \$45.88 | | \$596.31 | 13 |

Note: This table reflects fee-for-service data only.

(1) The sums of the payments may not match the totals due to rounding.

(2) Number of Discrete Patients contains the actual count of patients receiving at least one service. The total represents a discrete count of patients within all practitioner types.

Table 2.4
Total Number of Services Provided by Physicians and Allied Practitioners
for the Service Years Ended March 31, 2004 to March 31, 2008

| Practitioner Type | Number of Services | | | | | Percentage Change | | | |
|------------------------|--------------------|-------------------|-------------------|-------------------|-------------------|-------------------|---------------|---------------|---------------|
| | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 | 2005/ 2004 | 2006/ 2005 | 2007/ 2006 | 2008/ 2007 |
| Physicians | 30,044,400 | 31,683,660 | 33,428,098 | 34,031,123 | 35,054,154 | 5.46 | 5.51 | 1.80 | 3.01 |
| Dentists/Oral Surgeons | 14,802 | 14,658 | 17,007 | 16,783 | 16,769 | (0.97) | 16.03 | (1.32) | (0.08) |
| Chiropractors | 3,040,001 | 3,052,733 | 3,198,845 | 3,264,139 | 3,329,123 | 0.42 | 4.79 | 2.04 | 1.99 |
| Optometrists | 431,148 | 440,891 | 469,263 | 471,847 | 518,584 | 2.26 | 6.44 | 0.55 | 9.91 |
| Podiatrists | 292,035 | 288,280 | 293,254 | 297,524 | 293,281 | (1.29) | 1.73 | 1.46 | (1.43) |
| Total | 33,822,386 | 35,480,222 | 37,406,467 | 38,081,416 | 39,211,911 | 4.90% | 5.43% | 1.80% | 2.97% |

Note: This table reflects fee-for-service data only.

Table 2.5A
Distribution of Optometry Payments and Services per Patient for Recipients
0 to 18 Years of Age for the Service Years Ended March 31, 2004 to March 31, 2008

| Year | Total Optometry Payments | Number of Optometry Services | Average Cost per Service | Number of Discrete Patients ⁽¹⁾ | Average Cost per Discrete Patient | Number of Services per Patient | Population Covered |
|-----------|--------------------------|------------------------------|--------------------------|--|-----------------------------------|--------------------------------|--------------------|
| 2003/2004 | \$10,439,408 | 275,355 | \$37.91 | 236,503 | \$44.14 | 1.16 | 820,336 |
| 2004/2005 | \$11,427,267 | 280,094 | \$40.80 | 240,976 | \$47.42 | 1.16 | 821,643 |
| 2005/2006 | \$11,979,569 | 285,371 | \$41.98 | 249,878 | \$47.94 | 1.14 | 829,528 |
| 2006/2007 | \$11,768,511 | 286,037 | \$41.14 | 255,491 | \$46.06 | 1.12 | 849,493 |
| 2007/2008 | \$12,734,895 | 296,937 | \$42.89 | 264,947 | \$48.07 | 1.12 | 862,884 |

Note: This table reflects fee-for-service data only.

(1) Number of Discrete Patients contains the actual count of patients receiving at least one service.

Table 2.5B
Distribution of Optometry Payments and Services per Patient for Recipients
19 to 64 Years of Age for the Service Year Ended March 31, 2004 to March 31, 2008⁽¹⁾

| Year | Total Optometry Payments | Number of Optometry Services | Average Cost per Service | Number of Discrete Patients ⁽²⁾ | Average Cost per Discrete Patient | Number of Services per Patient | Population Covered |
|-----------|--------------------------|------------------------------|--------------------------|--|-----------------------------------|--------------------------------|--------------------|
| 2007/2008 | \$1,083,288 | 26,054 | \$41.58 | 20,065 | \$53.99 | 1.30 | 2,238,660 |

Note: This table reflects fee-for-service data only.

(1) Effective October 1, 2007, coverage was expanded to include certain medically necessary eye care services for 19 to 64 year olds. However, routine eye exams under optometry services for Albertans aged 19 to 64 years of age are not covered.

(2) Number of Discrete Patients contains the actual count of patients receiving at least one service.

Table 2.5C
Distribution of Optometry Payments and Services per Patient for Recipients
65 Years of Age and Older for the Service Years Ended March 31, 2004 to March 31, 2008

| Year | Total Optometry Payments | Number of Optometry Services | Average Cost per Service | Number of Discrete Patients ⁽¹⁾ | Average Cost per Discrete Patient | Number of Services per Patient | Population Covered |
|-----------|--------------------------|------------------------------|--------------------------|--|-----------------------------------|--------------------------------|--------------------|
| 2003/2004 | \$6,240,498 | 155,793 | \$40.06 | 104,866 | \$59.51 | 1.49 | 330,720 |
| 2004/2005 | \$6,935,096 | 160,797 | \$43.13 | 108,889 | \$63.69 | 1.48 | 339,216 |
| 2005/2006 | \$8,136,349 | 183,892 | \$44.25 | 126,172 | \$64.49 | 1.46 | 349,890 |
| 2006/2007 | \$8,035,835 | 185,810 | \$43.25 | 129,953 | \$61.84 | 1.43 | 360,706 |
| 2007/2008 | \$8,820,617 | 195,593 | \$45.10 | 135,981 | \$64.87 | 1.44 | 372,452 |

Note: This table reflects fee-for-service data only.

(1) Number of Discrete Patients contains the actual count of patients receiving at least one service.

Table 2.6
Total and Average Gross Payments to Physicians and Allied Practitioners
by Practitioner Type for the Service Years
Ended March 31, 2004 to March 31, 2008⁽¹⁾

| Practitioner Type | Number of Practitioners | | | | | Percentage Change | | | |
|------------------------|-------------------------|--------------|--------------|--------------|--------------|-------------------|--------------|--------------|--------------|
| | 2003/2004 | 2004/2005 | 2005/2006 | 2006/2007 | 2007/2008 | 2005/2004 | 2006/2005 | 2007/2006 | 2008/2007 |
| Physicians | 5,363 | 5,501 | 5,585 | 5,850 | 6,058 | 2.57 | 1.53 | 4.74 | 3.56 |
| Dentists/Oral Surgeons | 216 | 216 | 230 | 220 | 207 | 0.00 | 6.48 | (4.35) | (5.91) |
| Chiropractors | 816 | 844 | 861 | 890 | 906 | 3.43 | 2.01 | 3.37 | 1.80 |
| Optometrists | 358 | 367 | 382 | 397 | 434 | 2.51 | 4.09 | 3.93 | 9.32 |
| Podiatrists | 53 | 51 | 50 | 54 | 55 | (3.77) | (1.96) | 8.00 | 1.85 |
| Total | 6,806 | 6,979 | 7,108 | 7,411 | 7,660 | 2.54% | 1.85% | 4.26% | 3.36% |

| Practitioner Type | Total Gross Payments | | | | | Percentage Change | | | |
|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|-------------------|--------------|--------------|---------------|
| | 2003/2004 | 2004/2005 | 2005/2006 | 2006/2007 | 2007/2008 | 2005/2004 | 2006/2005 | 2007/2006 | 2008/2007 |
| Physicians | \$1,272,779,982 | \$1,348,724,184 | \$1,472,634,054 | \$1,558,128,163 | \$1,718,717,023 | 5.97 | 9.19 | 5.81 | 10.31 |
| Dentists/Oral Surgeons | 2,404,042 | 2,843,638 | 3,275,978 | 3,637,243 | 3,913,975 | 18.29 | 15.20 | 11.03 | 7.61 |
| Chiropractors | 39,038,527 | 39,966,107 | 41,785,422 | 43,479,957 | 45,711,999 | 2.38 | 4.55 | 4.06 | 5.13 |
| Optometrists | 16,679,907 | 18,362,362 | 20,115,918 | 19,804,346 | 22,638,799 | 10.09 | 9.55 | (1.55) | 14.31 |
| Podiatrists | 7,149,189 | 7,226,135 | 7,383,045 | 7,925,047 | 8,243,000 | 1.08 | 2.17 | 7.34 | 4.01 |
| Total | \$1,338,051,646 | \$1,417,122,426 | \$1,545,194,417 | \$1,632,974,756 | \$1,799,224,796 | 5.91% | 9.04% | 5.68% | 10.18% |

| Practitioner Type | Average Gross Payments | | | | | Percentage Change | | | |
|------------------------|------------------------|------------------|------------------|------------------|------------------|-------------------|--------------|--------------|--------------|
| | 2003/2004 | 2004/2005 | 2005/2006 | 2006/2007 | 2007/2008 | 2005/2004 | 2006/2005 | 2007/2006 | 2008/2007 |
| Physicians | \$237,326 | \$245,178 | \$263,677 | \$266,347 | \$283,710 | 3.31 | 7.54 | 1.01 | 6.52 |
| Dentists/Oral Surgeons | 11,130 | 13,165 | 14,243 | 16,533 | 18,908 | 18.29 | 8.19 | 16.07 | 14.37 |
| Chiropractors | 47,841 | 47,353 | 48,531 | 48,854 | 50,455 | (1.02) | 2.49 | 0.66 | 3.28 |
| Optometrists | 46,592 | 50,034 | 52,659 | 49,885 | 52,163 | 7.39 | 5.25 | (5.27) | 4.57 |
| Podiatrists | 134,890 | 141,689 | 147,661 | 146,760 | 149,873 | 5.04 | 4.21 | (0.61) | 2.12 |
| Total | \$196,599 | \$203,055 | \$217,388 | \$220,345 | \$234,886 | 3.28% | 7.06% | 1.36% | 6.60% |

Note: This table reflects fee-for-service data only.

(1) The sums of the payments may not match the totals due to rounding.

Table 2.7
Distribution of Physicians and Allied Practitioners by Gross Payment Range
for the Service Years Ended March 31, 2004 to March 31, 2008⁽¹⁾⁽²⁾

| Dollar Range | Total | | | | | Physicians | | | | | Dentists/Oral Surgeons | | | | |
|---|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|------------------------|---------------|---------------|---------------|---------------|
| | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 |
| Less than \$10,000 | 561 | 568 | 570 | 655 | 648 | 252 | 271 | 271 | 347 | 350 | 182 | 178 | 192 | 186 | 171 |
| 10,000- 19,999 | 295 | 310 | 278 | 268 | 274 | 159 | 163 | 134 | 132 | 141 | 9 | 12 | 11 | 8 | 8 |
| 20,000- 39,999 | 559 | 554 | 545 | 587 | 572 | 262 | 255 | 237 | 254 | 254 | 7 | 5 | 4 | 2 | 5 |
| 40,000- 59,999 | 508 | 514 | 508 | 496 | 541 | 209 | 221 | 226 | 206 | 224 | 3 | 3 | 2 | 3 | 1 |
| 60,000- 79,999 | 454 | 458 | 434 | 483 | 475 | 260 | 246 | 204 | 254 | 235 | 8 | 5 | 5 | 4 | 6 |
| 80,000- 99,999 | 339 | 335 | 328 | 352 | 348 | 247 | 231 | 206 | 230 | 209 | 2 | 6 | 6 | 5 | 2 |
| 100,000-119,999 | 297 | 309 | 291 | 300 | 291 | 252 | 255 | 233 | 238 | 223 | 1 | 3 | 5 | 1 | 4 |
| 120,000-139,999 | 283 | 296 | 293 | 270 | 264 | 252 | 268 | 259 | 242 | 228 | 1 | 1 | | 3 | 1 |
| 140,000-159,999 | 293 | 281 | 270 | 266 | 270 | 277 | 260 | 252 | 247 | 254 | | | 1 | 3 | 1 |
| 160,000-179,999 | 269 | 248 | 265 | 273 | 254 | 264 | 243 | 256 | 262 | 243 | | | 1 | 1 | 2 |
| 180,000-199,999 | 269 | 247 | 276 | 269 | 251 | 263 | 242 | 270 | 262 | 245 | | | | 1 | 1 |
| 200,000-299,999 | 1,243 | 1,309 | 1,224 | 1,250 | 1,232 | 1,232 | 1,299 | 1,214 | 1,237 | 1,217 | 3 | 2 | 1 | 1 | 3 |
| 300,000-399,999 | 697 | 748 | 863 | 876 | 943 | 696 | 746 | 862 | 875 | 940 | | 1 | 1 | 1 | 1 |
| 400,000-499,999 | 332 | 354 | 432 | 461 | 547 | 332 | 354 | 431 | 461 | 547 | | | 1 | | |
| 500,000-599,999 | 132 | 150 | 190 | 212 | 284 | 132 | 150 | 189 | 212 | 283 | | | | | 1 |
| 600,000-699,999 | 78 | 81 | 98 | 126 | 148 | 77 | 80 | 98 | 124 | 147 | | | | 1 | |
| 700,000-799,999 | 70 | 54 | 72 | 68 | 87 | 70 | 54 | 72 | 68 | 87 | | | | | |
| 800,000-899,999 | 34 | 43 | 33 | 37 | 47 | 34 | 43 | 33 | 37 | 47 | | | | | |
| 900,000-999,999 | 22 | 36 | 34 | 39 | 34 | 22 | 36 | 34 | 39 | 34 | | | | | |
| 1,000,000-1,999,999 | 66 | 75 | 86 | 103 | 127 | 66 | 75 | 86 | 103 | 127 | | | | | |
| 2,000,000 & Over⁽³⁾ | 5 | 9 | 18 | 20 | 23 | 5 | 9 | 18 | 20 | 23 | | | | | |
| Total | 6,806 | 6,979 | 7,108 | 7,411 | 7,660 | 5,363 | 5,501 | 5,585 | 5,850 | 6,058 | 216 | 216 | 230 | 220 | 207 |

Note: This table reflects fee-for-service data only.

Continued...

(1) A blank cell represents a zero value.

(2) These statistics cannot be used as an accurate measure of a practitioner's personal income, because they do not depict other sources of income and the figures quoted are payments from which practitioners pay business expenses, such as office and staff expenses.

(3) The figures have been revised for 2004 to 2006 to reflect those physicians and allied practitioners that are in the gross payment range of \$2,000,000 and over.

Table 2.7
Distribution of Physicians and Allied Practitioners by Gross Payment Range
for the Service Years Ended March 31, 2004 to March 31, 2008⁽¹⁾⁽²⁾

| Dollar Range | Chiropractors | | | | | Optometrists | | | | | Podiatrists | | | | |
|---------------------------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|
| | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 |
| Less than \$10,000 | 88 | 90 | 77 | 93 | 90 | 36 | 28 | 30 | 26 | 36 | 3 | 1 | | 3 | 1 |
| 10,000- 19,999 | 98 | 99 | 101 | 91 | 83 | 29 | 34 | 32 | 37 | 42 | | 2 | | | |
| 20,000- 39,999 | 198 | 208 | 219 | 231 | 225 | 90 | 86 | 84 | 100 | 86 | 2 | | 1 | | 2 |
| 40,000- 59,999 | 194 | 194 | 193 | 187 | 207 | 98 | 92 | 84 | 99 | 107 | 4 | 4 | 3 | 1 | 2 |
| 60,000- 79,999 | 116 | 131 | 136 | 135 | 140 | 68 | 75 | 86 | 84 | 91 | 2 | 1 | 3 | 6 | 3 |
| 80,000- 99,999 | 64 | 64 | 75 | 87 | 90 | 21 | 28 | 38 | 28 | 43 | 5 | 6 | 3 | 2 | 4 |
| 100,000-119,999 | 30 | 36 | 31 | 41 | 43 | 11 | 13 | 14 | 14 | 14 | 3 | 2 | 8 | 6 | 7 |
| 120,000-139,999 | 20 | 13 | 20 | 15 | 17 | 4 | 7 | 9 | 5 | 10 | 6 | 7 | 5 | 5 | 8 |
| 140,000-159,999 | 3 | 5 | 5 | 4 | 4 | 1 | 4 | 3 | 2 | 3 | 12 | 12 | 9 | 10 | 8 |
| 160,000-179,999 | 1 | | 1 | 2 | 3 | | | 2 | 1 | 1 | 4 | 5 | 5 | 7 | 5 |
| 180,000-199,999 | 2 | 2 | 2 | 2 | 2 | | | | 1 | | 4 | 3 | 4 | 3 | 3 |
| 200,000-299,999 | 1 | 1 | | 1 | 1 | | | | | 1 | 7 | 7 | 9 | 11 | 10 |
| 300,000-399,999 | | | | | | | | | | | 1 | 1 | | | 2 |
| 400,000-499,999 | | | | | | | | | | | | | | | |
| 500,000-599,999 | | | 1 | | | | | | | | | | | | |
| 600,000-699,999 | 1 | 1 | | 1 | 1 | | | | | | | | | | |
| 700,000-799,999 | | | | | | | | | | | | | | | |
| 800,000-899,999 | | | | | | | | | | | | | | | |
| 900,000-999,999 | | | | | | | | | | | | | | | |
| 1,000,000-1,999,999 | | | | | | | | | | | | | | | |
| 2,000,000 & Over ⁽¹⁾ | | | | | | | | | | | | | | | |
| Total | 816 | 844 | 861 | 890 | 906 | 358 | 367 | 382 | 397 | 434 | 53 | 51 | 50 | 54 | 55 |

Note: This table reflects fee-for-service data only.

(1) A blank cell represents a zero value.

(2) These statistics cannot be used as an accurate measure of a practitioner's personal income, because they do not depict other sources of income and the figures quoted are payments from which practitioners pay business expenses, such as office and staff expenses.

(3) The figures have been revised for 2004 to 2006 to reflect those physicians and allied practitioners that are in the gross payment range of \$2,000,000 and over.

Table 2.8
Distribution of Physician Payments and Services per Patient
for the Service Years Ended March 31, 2004 to March 31, 2008

| Year | Total Physician Payments | Number of Services | Average Cost per Service | Number of Discrete Patients ⁽¹⁾ | Average Cost per Discrete Patient | Number of Services per Patient | Population Covered |
|--|--------------------------|--------------------|--------------------------|--|-----------------------------------|--------------------------------|--------------------|
| 2003/2004 | \$1,272,779,982 | 30,044,400 | \$42.36 | 2,689,453 | \$473.25 | 11.17 | 3,165,157 |
| 2004/2005 | \$1,348,724,184 | 31,683,660 | \$42.57 | 2,728,340 | \$494.34 | 11.61 | 3,210,035 |
| 2005/2006 | \$1,472,634,054 | 33,428,098 | \$44.05 | 2,789,879 | \$527.85 | 11.98 | 3,275,931 |
| 2006/2007 | \$1,558,128,163 | 34,031,123 | \$45.79 | 2,848,553 | \$546.99 | 11.95 | 3,384,625 |
| 2007/2008 | \$1,718,717,023 | 35,054,154 | \$49.03 | 2,911,621 | \$590.30 | 12.04 | 3,473,996 |
| Percentage Change 2008/2007 | 10.31 | 3.01 | 7.09 | 2.21 | 7.92 | 0.77 | 2.64 |
| Annual Average % Change for Last 5 Years | 7.80 | 3.93 | 3.72 | 2.00 | 5.68 | 1.89 | 2.35 |

Note: This table reflects fee-for-service data only.

(1) Number of Discrete Patients contains the actual count of patients receiving at least one service.

Did You Know?

The number of physicians in
Alberta has increased 21% in
the last four years.

Source: Canada Institute for
Health Information

Table 2.9
Distribution of Discrete Patients by Payment Range
for Services Provided by Physicians
for the Service Year April 1, 2007 to March 31, 2008

| Dollar Range | Distribution of | | |
|---------------------|----------------------------------|------------------------|-------------------|
| | Discrete Patients ⁽¹⁾ | Payments | Services |
| \$ 0.01 - 50.00 | 300,464 | 10,034,824 | 310,262 |
| 50.01 - 100.00 | 409,805 | 31,362,251 | 823,771 |
| 100.01 - 200.00 | 530,225 | 78,729,965 | 1,968,348 |
| 200.01 - 300.00 | 361,203 | 89,254,847 | 2,117,223 |
| 300.01 - 400.00 | 254,288 | 88,356,713 | 2,048,269 |
| 400.01 - 500.00 | 187,285 | 83,796,422 | 1,900,950 |
| 500.01 - 600.00 | 138,938 | 76,076,339 | 1,705,313 |
| 600.01 - 700.00 | 105,063 | 68,056,051 | 1,499,054 |
| 700.01 - 800.00 | 81,772 | 61,169,080 | 1,323,036 |
| 800.01 - 900.00 | 65,391 | 55,474,603 | 1,177,905 |
| 900.01 - 1,000.00 | 52,560 | 49,843,396 | 1,040,506 |
| 1,000.01 - 2,000.00 | 254,064 | 354,863,338 | 6,960,282 |
| 2,000.01 - 3,000.00 | 86,110 | 208,754,689 | 3,794,158 |
| 3,000.01 - 4,000.00 | 36,946 | 126,924,778 | 2,299,907 |
| 4,000.01 - 5,000.00 | 17,862 | 79,415,564 | 1,454,262 |
| 5,000.01 & Over | 29,645 | 256,604,164 | 4,630,908 |
| Total | 2,911,621 | \$1,718,717,023 | 35,054,154 |

Note: This table reflects fee-for-service data only.

(1) Number of Discrete Patients contains the actual count of patients who received at least one medical service during the fiscal year.

Table 2.9A
Percentage Distribution of Discrete Patients by Payment Range
for Services Provided by Physicians
for the Service Year April 1, 2007 to March 31, 2008

| Dollar Range | Percentage Distribution | | |
|---------------------|----------------------------------|---------------|---------------|
| | Discrete Patients ⁽¹⁾ | Payments | Services |
| \$ 0.01 - 50.00 | 10.32 | 0.58 | 0.89 |
| 50.01 - 100.00 | 14.07 | 1.82 | 2.35 |
| 100.01 - 200.00 | 18.21 | 4.58 | 5.62 |
| 200.01 - 300.00 | 12.41 | 5.19 | 6.04 |
| 300.01 - 400.00 | 8.73 | 5.14 | 5.84 |
| 400.01 - 500.00 | 6.43 | 4.88 | 5.42 |
| 500.01 - 600.00 | 4.77 | 4.43 | 4.86 |
| 600.01 - 700.00 | 3.61 | 3.96 | 4.28 |
| 700.01 - 800.00 | 2.81 | 3.56 | 3.77 |
| 800.01 - 900.00 | 2.25 | 3.23 | 3.36 |
| 900.01 - 1,000.00 | 1.81 | 2.90 | 2.97 |
| 1,000.01 - 2,000.00 | 8.73 | 20.65 | 19.86 |
| 2,000.01 - 3,000.00 | 2.96 | 12.15 | 10.82 |
| 3,000.01 - 4,000.00 | 1.27 | 7.38 | 6.56 |
| 4,000.01 - 5,000.00 | 0.61 | 4.62 | 4.15 |
| 5,000.01 & Over | 1.02 | 14.93 | 13.21 |
| Total | 100.00 | 100.00 | 100.00 |

Note: This table reflects fee-for-service data only.

(1) Number of Discrete Patients contains the percentage of the actual count of patients who received at least one medical service during the fiscal year.

Table 2.10
Distribution of Physicians by Specialty
for the Service Years Ended March 31, 2004 to March 31, 2008

| Physicians by Specialty | Number of Practitioners | | | | |
|--|-------------------------|-----------|-----------|-----------|-----------|
| | 2003/2004 | 2004/2005 | 2005/2006 | 2006/2007 | 2007/2008 |
| Total: All Physicians | 5,363 | 5,501 | 5,585 | 5,850 | 6,058 |
| Subtotal: | | | | | |
| All Physicians (except Pathology) | 5,343 | 5,481 | 5,562 | 5,829 | 6,038 |
| All Specialists (except GP/FPs & Pathology) | 2,406 | 2,455 | 2,440 | 2,592 | 2,677 |
| Physicians by Specialty | | | | | |
| Anaesthesiology | 260 | 281 | 291 | 304 | 312 |
| Cardiovascular and Thoracic Surgery | 22 | 22 | 25 | 25 | 29 |
| Dermatology | 34 | 40 | 39 | 39 | 39 |
| Emergency Medicine | 65 | 68 | 72 | 78 | 79 |
| General Family Physicians (GP/FPs) | 2,937 | 3,026 | 3,122 | 3,237 | 3,361 |
| - General Family Physicians | 2,760 | 2,845 | 2,937 | 3,032 | 3,145 |
| - Full Time Emergency Room Physicians | 150 | 157 | 160 | 172 | 182 |
| - Mental Health Generalists | 19 | 18 | 18 | 20 | 19 |
| - Other General Practice Physicians ⁽¹⁾ | 8 | 6 | 7 | 13 | 15 |
| General Surgery | 150 | 155 | 157 | 170 | 170 |
| - General Surgery designated specialty | 137 | 139 | 141 | 153 | 155 |
| - Other General Surgery | 13 | 16 | 16 | 17 | 15 |
| Internal Medicine | 515 | 507 | 437 | 483 | 513 |
| - Internal Medicine designated specialty | 263 | 246 | 214 | 228 | 227 |
| - Cardiology | 66 | 61 | 50 | 58 | 62 |
| - Endocrinology/Metabolism | 7 | 7 | 2 | 2 | 3 |
| - Gastroenterology | 44 | 45 | 36 | 39 | 48 |
| - Infectious Diseases | 10 | 15 | 11 | 17 | 18 |
| - Other Internal Medicine | 125 | 133 | 124 | 139 | 155 |
| Neurology | 63 | 62 | 68 | 69 | 71 |
| Neurosurgery | 11 | 6 | 7 | 14 | 12 |
| Obstetrics-Gynaecology | 138 | 143 | 149 | 163 | 168 |
| Ophthalmology | 87 | 90 | 94 | 100 | 97 |
| Orthopaedic Surgery | 115 | 117 | 125 | 131 | 132 |
| Otolaryngology | 40 | 41 | 41 | 43 | 51 |
| Paediatrics | 229 | 223 | 216 | 231 | 232 |
| Physical Medicine & Rehabilitation | 29 | 30 | 29 | 32 | 32 |
| Plastic Surgery | 44 | 44 | 47 | 46 | 49 |
| Psychiatry | 329 | 342 | 352 | 357 | 372 |
| - Psychiatry designated specialty | 318 | 342 | 352 | 357 | 372 |
| - Mental Health specialty | 11 | N/A | N/A | N/A | N/A |
| Urology | 36 | 43 | 45 | 48 | 48 |
| Laboratory Specialists | 259 | 261 | 269 | 280 | 291 |
| - Pathology | 20 | 20 | 23 | 21 | 20 |
| - Radiology | 239 | 241 | 246 | 259 | 271 |

Note: This table reflects fee-for-service data only.

(1) Other General Practice Physicians refers to community medicine, geriatric medicine and occupational medicine.

Table 2.10A
Distribution of Average Gross Payments
for the Service Years Ended March 31, 2004 to March 31, 2008⁽¹⁾

| Physicians by Specialty | Average Payment | | | | |
|--|-----------------|-----------|-----------|-----------|-----------|
| | 2003/2004 | 2004/2005 | 2005/2006 | 2006/2007 | 2007/2008 |
| Total: All Physicians | \$237,326 | \$245,178 | \$263,677 | \$266,347 | \$283,710 |
| Subtotal: | | | | | |
| All Physicians (except Pathology) | 237,395 | 245,182 | 263,752 | 266,380 | 283,734 |
| All Specialists (except GP FPs & Pathology) | 292,380 | 304,239 | 334,368 | 335,770 | 357,101 |
| Physicians by Specialty | | | | | |
| Anaesthesiology | 250,858 | 250,467 | 262,975 | 270,945 | 295,514 |
| Cardiovascular and Thoracic Surgery | 548,864 | 526,835 | 518,261 | 532,365 | 438,390 |
| Dermatology | 493,553 | 487,498 | 565,833 | 600,540 | 617,993 |
| Emergency Medicine | 164,810 | 171,518 | 188,638 | 202,127 | 227,074 |
| General Family Physicians (GPFs) | 192,352 | 197,269 | 208,562 | 210,816 | 225,298 |
| - General Family Physicians | 193,346 | 197,521 | 207,617 | 210,417 | 224,827 |
| - Full Time Emergency Room Physicians | 179,229 | 196,961 | 232,440 | 230,628 | 248,598 |
| - Mental Health Generalists | 189,103 | 201,927 | 197,192 | 204,779 | 204,112 |
| - Other General Practice Physicians ⁽²⁾ | 103,109 | 71,755 | 88,439 | 50,972 | 68,360 |
| General Surgery | 315,223 | 322,037 | 340,271 | 334,201 | 354,065 |
| - General Surgery designated specialty | 313,119 | 326,086 | 343,368 | 338,938 | 355,570 |
| - Other General Surgery | 337,398 | 286,859 | 312,974 | 291,562 | 338,511 |
| Internal Medicine | 245,007 | 244,325 | 300,025 | 290,103 | 301,931 |
| - Internal Medicine designated specialty | 218,624 | 210,232 | 235,310 | 224,337 | 252,839 |
| - Cardiology | 464,413 | 519,419 | 662,565 | 603,784 | 585,500 |
| - Endocrinology/Metabolism | 123,705 | N/A | N/A | N/A | N/A |
| - Gastroenterology | 273,610 | 251,750 | 307,171 | 314,300 | 289,821 |
| - Infectious Diseases | 71,814 | 53,617 | 69,336 | 58,957 | 61,044 |
| - Other Internal Medicine | 195,251 | 210,851 | 288,752 | 291,866 | 297,039 |
| Neurology | 158,331 | 181,869 | 169,392 | 178,485 | 151,029 |
| Neurosurgery | 20,001 | N/A | N/A | N/A | N/A |
| Obstetrics-Gynaecology | 349,992 | 363,105 | 379,155 | 384,628 | 415,905 |
| Ophthalmology | 592,035 | 599,613 | 622,174 | 628,110 | 708,341 |
| Orthopaedic Surgery | 282,137 | 305,382 | 322,215 | 321,179 | 339,498 |
| Otolaryngology | 461,734 | 490,010 | 526,027 | 491,682 | 466,270 |
| Paediatrics | 140,337 | 145,548 | 160,456 | 157,458 | 177,671 |
| Physical Medicine & Rehabilitation | 111,880 | 124,001 | 139,223 | 146,779 | 186,930 |
| Plastic Surgery | 335,632 | 339,758 | 344,828 | 356,521 | 366,792 |
| Psychiatry | 200,098 | 207,799 | 226,401 | 230,125 | 249,638 |
| - Psychiatry designated specialty | 200,062 | 207,799 | 226,401 | 230,125 | 249,638 |
| - Mental Health specialty | 201,113 | N/A | N/A | N/A | N/A |
| Urology | 376,828 | 349,112 | 367,567 | 372,643 | 414,478 |
| Laboratory Specialists | 537,165 | 592,154 | 640,121 | 660,782 | 698,402 |
| - Pathology | 218,876 | 244,057 | 245,447 | 257,187 | 276,554 |
| - Radiology | 563,800 | 621,042 | 677,022 | 693,506 | 729,535 |

Note: This table reflects fee-for-service data only.

Continued

- (1) The average payments and percentage change for fee-for-services reflect the fact that some physician specialties are now being paid primarily through ARPs rather than through fee-for-service claims. Due to the change in payment method, average and median payments for these specialties have not been provided.
- (2) Other General Practice Physicians refers to community medicine, geriatric medicine and occupational medicine.

Table 2.10A
Distribution of Average Gross Payments
for the Service Years Ended March 31, 2004 to March 31, 2008⁽¹⁾

| Physicians by Specialty | Percentage Change | | | |
|--|-------------------|-----------|-----------|-----------|
| | 2005/2004 | 2006/2005 | 2007/2006 | 2008/2007 |
| Total: All Physicians | 3.31% | 7.54% | 1.01% | 6.52% |
| Subtotal: | | | | |
| All Physicians (except Pathology) | 3.28 | 7.57 | 1.00 | 6.51 |
| All Specialists (except GPs & Pathology) | 4.06 | 7.90 | 0.42 | 6.35 |
| Physicians by Specialty | | | | |
| Anaesthesiology | (0.16) | 4.99 | 3.03 | 9.07 |
| Cardiovascular and Thoracic Surgery | (4.01) | (1.63) | 2.72 | (17.65) |
| Dermatology | (1.23) | 16.07 | 6.13 | 2.91 |
| Emergency Medicine | 4.07 | 9.98 | 7.15 | 12.34 |
| General Family Physicians (GPs) | 2.56 | 5.72 | 1.08 | 6.87 |
| - General Family Physicians | 2.16 | 5.11 | 1.35 | 6.85 |
| - Full Time Emergency Room Physicians | 9.89 | 18.01 | (0.78) | 7.79 |
| - Mental Health (generalists) | 6.78 | (2.34) | 3.85 | (0.33) |
| - Other General Practice Physicians ⁽²⁾ | (30.41) | 23.25 | (42.37) | 34.11 |
| General Surgery | 2.16 | 5.66 | (1.78) | 5.94 |
| - General Surgery designated specialty | 4.14 | 5.30 | (1.29) | 4.91 |
| - Other General Surgery | (14.98) | 9.10 | (6.84) | 16.10 |
| Internal Medicine | (0.28) | 22.80 | (3.31) | 4.08 |
| - Internal Medicine designated specialty | (3.84) | 11.93 | (4.66) | 12.71 |
| - Cardiology | 11.84 | 27.56 | (8.87) | (5.03) |
| - Endocrinology/Metabolism | N/A | N/A | N/A | N/A |
| - Gastroenterology | (7.99) | 22.01 | 2.32 | (7.79) |
| - Infectious Diseases | (25.34) | 29.32 | (14.97) | 3.54 |
| - Other Internal Medicine | 7.99 | 36.95 | 1.08 | 1.77 |
| Neurology | 14.87 | (6.86) | 5.37 | (15.38) |
| Neurosurgery | N/A | N/A | N/A | N/A |
| Obstetrics-Gynaecology | 3.75 | 4.42 | 1.44 | 8.13 |
| Ophthalmology | 1.28 | 3.76 | 0.95 | 12.77 |
| Orthopaedic Surgery | 8.24 | 5.51 | (0.32) | 5.70 |
| Otolaryngology | 6.12 | 7.35 | (0.53) | (5.17) |
| Paediatrics | 3.71 | 10.24 | (1.87) | 12.84 |
| Physical Medicine & Rehabilitation | 10.83 | 12.28 | 5.43 | 27.36 |
| Plastic Surgery | 1.23 | 1.49 | 3.39 | 2.88 |
| Psychiatry | 3.85 | 8.95 | 1.65 | 8.48 |
| - Psychiatry designated specialty | 3.87 | 8.95 | 1.65 | 8.48 |
| - Mental Health specialty | N/A | N/A | N/A | N/A |
| Urology | (7.36) | 5.29 | 1.38 | 11.23 |
| Laboratory Specialists | 10.24 | 8.10 | 3.23 | 5.69 |
| - Pathology | 11.50 | 0.57 | 4.78 | 7.53 |
| - Radiology | 10.15 | 9.01 | 2.43 | 5.20 |

Note: This table reflects fee-for-service data only.

(1) The average payments and percentage change for fee-for-services reflect the fact that some physician specialties are now being paid primarily through ARPs rather than through fee-for-service claims. Due to the change in payment method, average and median payments for these specialties have not been provided.

(2) Other General Practice Physicians refers to community medicine, geriatric medicine and occupational medicine.

Table 2.10B
Distribution of Median Gross Payments
for the Service Years Ended March 31, 2004 to March 31, 2008⁽¹⁾

| Physicians by Specialty | Median Payment | | | | |
|--|----------------|-----------|-----------|-----------|-----------|
| | 2003/2004 | 2004/2005 | 2005/2006 | 2006/2007 | 2007/2008 |
| Total: All Physicians | \$198,980 | \$206,290 | \$219,552 | \$218,283 | \$233,610 |
| Subtotal: | | | | | |
| All Physicians (except Pathology) | 199,520 | 206,903 | 219,903 | 218,764 | 234,195 |
| All Specialists (except GPs & Pathology) | 237,148 | 244,664 | 272,349 | 267,106 | 285,982 |
| Physicians by Specialty | | | | | |
| Anaesthesiology | 265,629 | 259,428 | 262,510 | 272,651 | 294,925 |
| Cardiovascular and Thoracic Surgery | 581,377 | 524,139 | 527,897 | 505,955 | 319,071 |
| Dermatology | 449,449 | 438,569 | 543,800 | 553,329 | 504,361 |
| Emergency Medicine | 156,243 | 161,205 | 180,514 | 180,945 | 213,476 |
| General Family Physicians (GFPs) | 182,226 | 188,092 | 196,813 | 199,146 | 209,778 |
| - General Family Physicians | 182,597 | 187,290 | 193,458 | 196,841 | 208,025 |
| - Full Time Emergency Room Physicians | 177,809 | 202,451 | 235,446 | 225,229 | 249,928 |
| - Mental Health Generalists | 193,058 | 228,259 | 211,694 | 207,757 | 181,420 |
| - Other General Practice Physicians ⁽²⁾ | 66,896 | 59,645 | 111,737 | 13,888 | 21,571 |
| General Surgery | 327,550 | 337,241 | 347,241 | 326,974 | 359,201 |
| - General Surgery designated specialty | 322,339 | 339,697 | 347,702 | 338,929 | 360,751 |
| - Other General Surgery | 333,538 | 308,489 | 306,219 | 284,000 | 337,007 |
| Internal Medicine | 173,216 | 144,555 | 241,416 | 208,475 | 219,389 |
| - Internal Medicine designated specialty | 164,429 | 136,501 | 187,174 | 165,368 | 187,595 |
| - Cardiology | 410,715 | 553,138 | 636,507 | 611,951 | 612,808 |
| - Endocrinology/Metabolism | 128,825 | N/A | N/A | N/A | N/A |
| - Gastroenterology | 273,574 | 154,561 | 307,718 | 299,540 | 248,403 |
| - Infectious Diseases | 59,318 | 49,543 | 65,987 | 49,468 | 47,016 |
| - Other Internal Medicine | 132,205 | 120,358 | 212,437 | 213,762 | 209,244 |
| Neurology | 154,900 | 183,059 | 151,177 | 162,336 | 75,499 |
| Neurosurgery | 20,001 | N/A | N/A | N/A | N/A |
| Obstetrics-Gynaecology | 309,387 | 344,093 | 354,268 | 362,387 | 392,837 |
| Ophthalmology | 507,175 | 498,291 | 529,181 | 513,240 | 590,839 |
| Orthopaedic Surgery | 307,811 | 321,064 | 334,523 | 339,793 | 360,170 |
| Otolaryngology | 467,438 | 471,779 | 510,524 | 430,400 | 383,559 |
| Paediatrics | 85,858 | 103,909 | 123,417 | 106,387 | 126,068 |
| Physical Medicine & Rehabilitation | 102,221 | 112,857 | 127,262 | 134,178 | 181,045 |
| Plastic Surgery | 358,181 | 356,038 | 365,567 | 368,685 | 381,659 |
| Psychiatry | 200,048 | 205,354 | 219,090 | 223,086 | 239,557 |
| - Psychiatry designated specialty | 199,784 | 205,354 | 219,090 | 223,086 | 239,557 |
| - Mental Health specialty | 208,056 | N/A | N/A | N/A | N/A |
| Urology | 389,516 | 361,810 | 382,561 | 401,469 | 427,910 |
| Laboratory Specialists | 430,466 | 467,977 | 466,773 | 551,415 | 523,417 |
| - Pathology | 2,253 | 2,028 | 2,895 | 2,315 | 2,866 |
| - Radiology | 462,177 | 486,886 | 502,006 | 576,182 | 566,890 |

Note: This table reflects fee-for-service data only.

Continued...

(1) The average payments and percentage change for fee-for-services reflect the fact that some physician specialties are now being paid primarily through ARPs rather than through fee-for-service claims. Due to the change in payment method, average and median payments for these specialties have not been provided.

(2) Other General Practice Physicians refers to community medicine, geriatric medicine and occupational medicine.

Table 2.10B
Distribution of Median Gross Payments
for the Service Years Ended March 31, 2004 to March 31, 2008⁽¹⁾

| Physicians by Specialty | Percentage Change | | | |
|--|-------------------|-----------|-----------|-----------|
| | 2005/2004 | 2006/2005 | 2007/2006 | 2008/2007 |
| Total: All Physicians | 3.67% | 6.43% | -0.58% | 7.02% |
| Subtotal: | | | | |
| All Physicians (except Pathology) | 3.70 | 6.28 | (0.52) | 7.05 |
| All Specialists (except GP FPs & Pathology) | 3.17 | 11.32 | (1.93) | 7.07 |
| Physicians by Specialty | | | | |
| Anaesthesiology | (2.33) | 1.19 | 3.86 | 8.17 |
| Cardiovascular and Thoracic Surgery | (9.85) | 0.72 | (4.16) | (36.94) |
| Dermatology | (2.42) | 23.99 | 1.75 | (8.85) |
| Emergency Medicine | 3.18 | 11.98 | 0.24 | 17.98 |
| General Family Physicians (GP FPs) | 3.22 | 4.64 | 1.19 | 5.34 |
| - General Family Physicians | 2.57 | 3.29 | 1.75 | 5.68 |
| - Full Time Emergency Room Physicians | 13.86 | 16.30 | (4.34) | 10.97 |
| - Mental Health Generalists | 18.23 | (7.26) | (1.86) | (12.68) |
| - Other General Practice Physicians ⁽²⁾ | (10.84) | 87.34 | (87.57) | 55.32 |
| General Surgery | 2.96 | 2.97 | (5.84) | 9.86 |
| - General Surgery designated specialty | 5.39 | 2.36 | (2.52) | 6.44 |
| - Other General Surgery | (7.51) | (0.74) | (7.26) | 18.66 |
| Internal Medicine | (16.55) | 67.01 | (13.64) | 5.24 |
| - Internal Medicine designated specialty | (16.99) | 37.12 | (11.65) | 13.44 |
| - Cardiology | 34.68 | 15.07 | (3.86) | 0.14 |
| - Endocrinology/Metabolism | N/A | N/A | N/A | N/A |
| - Gastroenterology | (43.50) | 99.09 | (2.66) | (17.07) |
| - Infectious Diseases | (16.48) | 33.19 | (25.03) | (4.96) |
| - Other Internal Medicine | (8.96) | 76.50 | 0.62 | (2.11) |
| Neurology | 18.18 | (17.42) | 7.38 | (53.49) |
| Neurosurgery | N/A | N/A | N/A | N/A |
| Obstetrics-Gynaecology | 11.22 | 2.96 | 2.29 | 8.40 |
| Ophthalmology | (1.75) | 6.20 | (3.01) | 15.12 |
| Orthopaedic Surgery | 4.31 | 4.19 | 1.58 | 6.00 |
| Otolaryngology | 0.93 | 8.21 | (15.69) | (10.88) |
| Paediatrics | 21.02 | 18.78 | (13.80) | 18.50 |
| Physical Medicine & Rehabilitation | 10.40 | 12.76 | 5.43 | 34.93 |
| Plastic Surgery | (0.60) | 2.68 | 0.85 | 3.52 |
| Psychiatry | 2.65 | 6.69 | 1.82 | 7.38 |
| - Psychiatry designated specialty | 2.79 | 6.69 | 1.82 | 7.38 |
| - Mental Health specialty | N/A | N/A | N/A | N/A |
| Urology | (7.11) | 5.74 | 4.94 | 6.59 |
| Laboratory Specialists | 8.71 | (0.26) | 18.13 | (5.08) |
| - Pathology | (9.98) | 42.71 | (20.03) | 23.79 |
| - Radiology | 5.35 | 3.11 | 14.78 | (1.61) |

Note: This table reflects fee-for-service data only.

(1) The average payments and percentage change for fee-for-services reflect the fact that some physician specialties are now being paid primarily through ARPs rather than through fee-for-service claims. Due to the change in payment method, average and median payments for these specialties have not been provided.

(2) Other General Practice Physicians refers to community medicine, geriatric medicine and occupational medicine.

Table 2.11

Distribution of Gross Payments by Payment Range and Specialty
for the Service Year April 1, 2007 to March 31, 2008⁽¹⁾⁽²⁾

| Dollar Range | All Physicians | | All Physicians (except Pathology) | | All Specialties (except General/Family Physicians and Pathology) | |
|---------------------|------------------------|----------------------|-----------------------------------|----------------------|--|----------------------|
| | Payments | Number of Physicians | Payments | Number of Physicians | Payments | Number of Physicians |
| Less than \$10,000 | 1,031,547 | 350 | 1,001,514 | 336 | 485,313 | 207 |
| 10,000- 19,999 | 2,056,865 | 141 | 2,044,447 | 140 | 932,154 | 65 |
| 20,000- 39,999 | 7,488,156 | 254 | 7,488,156 | 254 | 3,012,945 | 102 |
| 40,000- 59,999 | 11,061,432 | 224 | 11,061,432 | 224 | 4,257,025 | 86 |
| 60,000- 79,999 | 16,462,234 | 235 | 16,321,212 | 233 | 7,008,546 | 100 |
| 80,000- 99,999 | 18,970,306 | 209 | 18,970,306 | 209 | 6,237,046 | 69 |
| 100,000-119,999 | 24,501,892 | 223 | 24,501,892 | 223 | 7,731,425 | 71 |
| 120,000-139,999 | 29,526,160 | 228 | 29,526,160 | 228 | 8,864,572 | 69 |
| 140,000-159,999 | 38,275,035 | 254 | 38,275,035 | 254 | 12,916,192 | 86 |
| 160,000-179,999 | 41,095,626 | 243 | 41,095,626 | 243 | 12,029,437 | 71 |
| 180,000-199,999 | 46,606,588 | 245 | 46,606,588 | 245 | 13,669,730 | 72 |
| 200,000-299,999 | 302,970,373 | 1,217 | 302,970,373 | 1,217 | 95,687,701 | 385 |
| 300,000-399,999 | 325,099,594 | 940 | 324,759,410 | 939 | 144,035,357 | 412 |
| 400,000-499,999 | 243,152,752 | 547 | 243,152,752 | 547 | 131,675,573 | 295 |
| 500,000-599,999 | 152,856,274 | 283 | 152,856,274 | 283 | 99,368,419 | 184 |
| 600,000-699,999 | 95,089,021 | 147 | 95,089,021 | 147 | 73,152,322 | 113 |
| 700,000-799,999 | 65,005,363 | 87 | 65,005,363 | 87 | 55,242,617 | 74 |
| 800,000-899,999 | 40,130,935 | 47 | 40,130,935 | 47 | 34,274,137 | 40 |
| 900,000-999,999 | 32,280,117 | 34 | 32,280,117 | 34 | 31,348,966 | 33 |
| 1,000,000-1,999,999 | 167,280,907 | 127 | 167,280,907 | 127 | 161,260,132 | 122 |
| 2,000,000 & Over | 57,775,845 | 23 | 52,768,420 | 21 | 52,768,420 | 21 |
| Total | \$1,718,717,023 | 6,058 | \$1,713,185,942 | 6,038 | \$955,958,030 | 2,677 |

Note: This table reflects fee-for-service data only.

(1) A blank cell represents a zero value.

(2) These statistics cannot be used as an accurate measure of a practitioner's personal income, because they do not depict other sources of income and the figures quoted are payments from which practitioners pay business expenses, such as office and staff expenses.

Continued...

Table 2.11
Distribution of Gross Payments by Payment Range and Specialty
for the Service Year April 1, 2007 to March 31, 2008⁽¹⁾⁽²⁾

| Dollar Range | Anaesthesiology | | Cardiovascular and Thoracic Surgery | | Dermatology | |
|---------------------|---------------------|----------------------|-------------------------------------|----------------------|---------------------|----------------------|
| | Payments | Number of Physicians | Payments | Number of Physicians | Payments | Number of Physicians |
| Less than \$10,000 | 7,678 | 3 | | | 145 | 2 |
| 10,000- 19,999 | 32,274 | 2 | | | | |
| 20,000- 39,999 | 75,938 | 3 | 65,504 | 2 | 31,868 | 1 |
| 40,000- 59,999 | 183,855 | 4 | 55,111 | 1 | 47,235 | 1 |
| 60,000- 79,999 | 561,054 | 8 | 146,682 | 2 | | |
| 80,000- 99,999 | 793,926 | 9 | 182,783 | 2 | | |
| 100,000-119,999 | 319,855 | 3 | 107,945 | 1 | | |
| 120,000-139,999 | 878,106 | 7 | 122,395 | 1 | | |
| 140,000-159,999 | 2,409,416 | 16 | 145,784 | 1 | 141,035 | 1 |
| 160,000-179,999 | 2,677,901 | 16 | | | | |
| 180,000-199,999 | 2,456,879 | 13 | 381,615 | 2 | 197,812 | 1 |
| 200,000-299,999 | 19,232,531 | 77 | 488,062 | 2 | 227,220 | 1 |
| 300,000-399,999 | 32,106,580 | 92 | 658,807 | 2 | 2,558,584 | 7 |
| 400,000-499,999 | 19,295,399 | 43 | 415,312 | 1 | 2,235,472 | 5 |
| 500,000-599,999 | 2,723,684 | 5 | 545,571 | 1 | 1,017,829 | 2 |
| 600,000-699,999 | 3,307,705 | 5 | 3,398,206 | 5 | 3,300,234 | 5 |
| 700,000-799,999 | 2,243,219 | 3 | 751,216 | 1 | 3,668,939 | 5 |
| 800,000-899,999 | | | 1,727,535 | 2 | 894,968 | 1 |
| 900,000-999,999 | 1,860,526 | 2 | | | 2,968,422 | 3 |
| 1,000,000-1,999,999 | 1,033,764 | 1 | 3,520,785 | 3 | 4,204,949 | 3 |
| 2,000,000 & Over | | | | | 2,607,016 | 1 |
| Total | \$92,200,290 | 312 | \$12,713,313 | 29 | \$24,101,728 | 39 |

Note: This table reflects fee-for-service data only.

Continued...

(1) A blank cell represents a zero value.

(2) These statistics cannot be used as an accurate measure of a practitioner's personal income, because they do not depict other sources of income and the figures quoted are payments from which practitioners pay business expenses, such as office and staff expenses.

Table 2.11
Distribution of Gross Payments by Payment Range and Specialty
for the Service Year April 1, 2007 to March 31, 2008⁽¹⁾⁽²⁾

| Dollar Range | Emergency Medicine | | All General/Family Physicians | | All General Surgery | |
|---------------------|---------------------|----------------------|-------------------------------|----------------------|---------------------|----------------------|
| | Payments | Number of Physicians | Payments | Number of Physicians | Payments | Number of Physicians |
| Less than \$10,000 | 5,144 | 1 | 516,201 | 129 | 12,217 | 3 |
| 10,000- 19,999 | 16,074 | 1 | 1,112,292 | 75 | 118,544 | 8 |
| 20,000- 39,999 | 31,923 | 1 | 4,475,211 | 152 | 292,144 | 10 |
| 40,000- 59,999 | 154,906 | 3 | 6,804,408 | 138 | 203,692 | 4 |
| 60,000- 79,999 | 137,169 | 2 | 9,312,666 | 133 | 279,591 | 4 |
| 80,000- 99,999 | 452,993 | 5 | 12,733,260 | 140 | 197,759 | 2 |
| 100,000-119,999 | 211,668 | 2 | 16,770,467 | 152 | 114,345 | 1 |
| 120,000-139,999 | 901,405 | 7 | 20,661,588 | 159 | | |
| 140,000-159,999 | 611,032 | 4 | 25,358,844 | 168 | 740,180 | 5 |
| 160,000-179,999 | 696,326 | 4 | 29,066,189 | 172 | 336,974 | 2 |
| 180,000-199,999 | 946,363 | 5 | 32,936,858 | 173 | 574,897 | 3 |
| 200,000-299,999 | 6,441,701 | 26 | 207,282,672 | 832 | 5,976,814 | 24 |
| 300,000-399,999 | 4,148,186 | 12 | 180,724,054 | 527 | 11,660,300 | 33 |
| 400,000-499,999 | 1,340,365 | 3 | 111,477,179 | 252 | 13,025,039 | 29 |
| 500,000-599,999 | 581,837 | 1 | 53,487,855 | 99 | 11,332,799 | 21 |
| 600,000-699,999 | 1,261,759 | 2 | 21,936,699 | 34 | 6,980,758 | 11 |
| 700,000-799,999 | | | 9,762,746 | 13 | 6,051,411 | 8 |
| 800,000-899,999 | | | 5,856,798 | 7 | 822,608 | 1 |
| 900,000-999,999 | | | 931,150 | 1 | | |
| 1,000,000-1,999,999 | | | 6,020,775 | 5 | 1,470,998 | 1 |
| 2,000,000 & Over | | | | | | |
| Total | \$17,938,850 | 79 | \$757,227,912 | 3,361 | \$60,191,070 | 170 |

Note: This table reflects fee-for-service data only.

Continued...

(1) A blank cell represents a zero value.

(2) These statistics cannot be used as an accurate measure of a practitioner's personal income, because they do not depict other sources of income and the figures quoted are payments from which practitioners pay business expenses, such as office and staff expenses.

Did You Know?

84% of Albertans who have a personal family doctor are satisfied with the services they received.

Source: Health Quality Council of Alberta

Table 2.11
Distribution of Gross Payments by Payment Range and Specialty
for the Service Year April 1, 2007 to March 31, 2008⁽¹⁾⁽²⁾

| Dollar Range | All Internal Medicine | | Neurology | | Neurosurgery | |
|---------------------|-----------------------|----------------------|---------------------|----------------------|------------------|----------------------|
| | Payments | Number of Physicians | Payments | Number of Physicians | Payments | Number of Physicians |
| Less than \$10,000 | 94,510 | 83 | 23,383 | 9 | 7,341 | 6 |
| 10,000- 19,999 | 316,171 | 22 | 67,456 | 5 | | |
| 20,000- 39,999 | 740,744 | 25 | 181,664 | 7 | 28,073 | 1 |
| 40,000- 59,999 | 1,157,130 | 23 | 229,386 | 5 | 111,512 | 2 |
| 60,000- 79,999 | 1,557,434 | 23 | 844,449 | 12 | 136,984 | 2 |
| 80,000- 99,999 | 1,090,034 | 12 | 634,020 | 7 | | |
| 100,000-119,999 | 1,194,140 | 11 | 209,330 | 2 | 102,203 | 1 |
| 120,000-139,999 | 1,694,128 | 13 | 257,884 | 2 | | |
| 140,000-159,999 | 2,247,919 | 15 | 152,981 | 1 | | |
| 160,000-179,999 | 1,357,729 | 8 | | | | |
| 180,000-199,999 | 1,890,378 | 10 | 189,374 | 1 | | |
| 200,000-299,999 | 12,155,490 | 49 | 1,809,428 | 7 | | |
| 300,000-399,999 | 19,567,182 | 56 | 2,181,903 | 6 | | |
| 400,000-499,999 | 19,150,760 | 43 | 419,276 | 1 | | |
| 500,000-599,999 | 19,417,122 | 36 | 1,631,260 | 3 | | |
| 600,000-699,999 | 21,338,065 | 33 | 1,891,294 | 3 | | |
| 700,000-799,999 | 14,890,012 | 20 | | | | |
| 800,000-899,999 | 7,528,865 | 9 | | | | |
| 900,000-999,999 | 4,677,383 | 5 | | | | |
| 1,000,000-1,999,999 | 22,825,379 | 17 | | | | |
| 2,000,000 & Over | | | | | | |
| Total | \$154,890,576 | 513 | \$10,723,089 | 71 | \$386,112 | 12 |

Note: This table reflects fee-for-service data only.

Continued...

(1) A blank cell represents a zero value.

(2) These statistics cannot be used as an accurate measure of a practitioner's personal income, because they do not depict other sources of income and the figures quoted are payments from which practitioners pay business expenses, such as office and staff expenses.

Table 2.11
Distribution of Gross Payments by Payment Range and Specialty
for the Service Year April 1, 2007 to March 31, 2008⁽¹⁾⁽²⁾

| Dollar Range | Obstetrics-Gynaecology | | Ophthalmology | | Orthopaedic Surgery | |
|---------------------|------------------------|----------------------|---------------------|----------------------|---------------------|----------------------|
| | Payments | Number of Physicians | Payments | Number of Physicians | Payments | Number of Physicians |
| Less than \$10,000 | 7,855 | 5 | 9,495 | 3 | 12,006 | 3 |
| 10,000- 19,999 | 16,315 | 1 | 10,027 | 1 | 53,129 | 3 |
| 20,000- 39,999 | 172,476 | 6 | | | 84,439 | 3 |
| 40,000- 59,999 | 247,810 | 5 | 43,764 | 1 | 245,362 | 5 |
| 60,000- 79,999 | 413,905 | 6 | 64,429 | 1 | 152,354 | 2 |
| 80,000- 99,999 | 184,645 | 2 | | | 262,675 | 3 |
| 100,000-119,999 | 344,392 | 3 | 209,199 | 2 | 219,537 | 2 |
| 120,000-139,999 | 254,863 | 2 | 127,816 | 1 | 380,608 | 3 |
| 140,000-159,999 | 149,722 | 1 | 304,912 | 2 | 738,651 | 5 |
| 160,000-179,999 | 507,450 | 3 | 166,319 | 1 | 160,097 | 1 |
| 180,000-199,999 | 757,625 | 4 | 184,638 | 1 | 759,320 | 4 |
| 200,000-299,999 | 5,433,166 | 22 | 2,358,807 | 10 | 4,583,136 | 18 |
| 300,000-399,999 | 8,697,835 | 25 | 3,468,714 | 10 | 7,188,897 | 21 |
| 400,000-499,999 | 13,844,612 | 31 | 3,123,239 | 7 | 12,911,984 | 29 |
| 500,000-599,999 | 13,015,518 | 24 | 4,968,396 | 9 | 11,635,510 | 22 |
| 600,000-699,999 | 5,844,445 | 9 | 5,829,912 | 9 | 3,855,452 | 6 |
| 700,000-799,999 | 2,214,675 | 3 | 2,987,114 | 4 | 716,593 | 1 |
| 800,000-899,999 | 2,552,435 | 3 | 5,127,530 | 6 | 854,035 | 1 |
| 900,000-999,999 | 3,815,585 | 4 | 5,648,013 | 6 | | |
| 1,000,000-1,999,999 | 11,396,762 | 9 | 24,331,204 | 19 | | |
| 2,000,000 & Over | | | 9,745,534 | 4 | | |
| Total | \$69,872,091 | 168 | \$68,709,060 | 97 | \$44,813,785 | 132 |

Note: This table reflects fee-for-service data only.

Continued...

(1) A blank cell represents a zero value.

(2) These statistics cannot be used as an accurate measure of a practitioner's personal income, because they do not depict other sources of income and the figures quoted are payments from which practitioners pay business expenses, such as office and staff expenses.

Table 2.11
Distribution of Gross Payments by Payment Range and Specialty
for the Service Year April 1, 2007 to March 31, 2008⁽¹⁾⁽²⁾

| Dollar Range | Otolaryngology | | Paediatrics | | Physical Medicine and Rehabilitation | |
|---------------------|---------------------|----------------------|---------------------|----------------------|--------------------------------------|----------------------|
| | Payments | Number of Physicians | Payments | Number of Physicians | Payments | Number of Physicians |
| Less than \$10,000 | 9,198 | 1 | 165,438 | 50 | | |
| 10,000- 19,999 | | | 150,525 | 11 | 33,671 | 2 |
| 20,000- 39,999 | | | 458,873 | 15 | | |
| 40,000- 59,999 | 95,404 | 2 | 525,918 | 11 | | |
| 60,000- 79,999 | 136,188 | 2 | 661,791 | 9 | 148,143 | 2 |
| 80,000- 99,999 | 88,260 | 1 | 816,249 | 9 | 169,537 | 2 |
| 100,000-119,999 | 216,360 | 2 | 952,413 | 9 | 212,376 | 2 |
| 120,000-139,999 | 250,650 | 2 | 1,031,998 | 8 | 532,659 | 4 |
| 140,000-159,999 | | | 1,774,738 | 12 | 298,589 | 2 |
| 160,000-179,999 | 162,221 | 1 | 1,013,747 | 6 | 341,567 | 2 |
| 180,000-199,999 | 189,025 | 1 | 1,314,620 | 7 | 759,849 | 4 |
| 200,000-299,999 | 1,260,303 | 5 | 7,036,638 | 29 | 1,894,508 | 8 |
| 300,000-399,999 | 3,238,523 | 9 | 7,177,886 | 21 | 730,956 | 2 |
| 400,000-499,999 | 1,337,303 | 3 | 8,940,743 | 20 | 859,899 | 2 |
| 500,000-599,999 | 4,303,354 | 8 | 6,531,303 | 12 | | |
| 600,000-699,999 | 1,998,715 | 3 | 616,469 | 1 | | |
| 700,000-799,999 | 2,943,171 | 4 | | | | |
| 800,000-899,999 | 1,733,492 | 2 | 899,485 | 1 | | |
| 900,000-999,999 | 931,538 | 1 | | | | |
| 1,000,000-1,999,999 | 4,886,041 | 4 | 1,150,747 | 1 | | |
| 2,000,000 & Over | | | | | | |
| Total | \$23,779,746 | 51 | \$41,219,581 | 232 | \$5,981,754 | 32 |

Note: This table reflects fee-for-service data only.

Continued...

(1) A blank cell represents a zero value.

(2) These statistics cannot be used as an accurate measure of a practitioner's personal income, because they do not depict other sources of income and the figures quoted are payments from which practitioners pay business expenses, such as office and staff expenses.

Table 2.11
Distribution of Gross Payments by Payment Range and Specialty
for the Service Year April 1, 2007 to March 31, 2008⁽¹⁾⁽²⁾

| Dollar Range | Plastic Surgery | | All Psychiatry | | Urology | |
|---------------------|---------------------|----------------------|---------------------|----------------------|---------------------|----------------------|
| | Payments | Number of Physicians | Payments | Number of Physicians | Payments | Number of Physicians |
| Less than \$10,000 | | | 34,932 | 8 | 821 | 1 |
| 10,000- 19,999 | | | 69,678 | 5 | 10,171 | 1 |
| 20,000- 39,999 | 66,501 | 3 | 514,007 | 16 | 35,747 | 1 |
| 40,000- 59,999 | | | 707,729 | 14 | | |
| 60,000- 79,999 | 208,617 | 3 | 1,063,221 | 15 | | |
| 80,000- 99,999 | | | 755,474 | 8 | 87,994 | 1 |
| 100,000-119,999 | 109,955 | 1 | 2,661,452 | 24 | | |
| 120,000-139,999 | 257,582 | 2 | 1,676,204 | 13 | 249,903 | 2 |
| 140,000-159,999 | | | 2,581,459 | 17 | | |
| 160,000-179,999 | 179,634 | 1 | 3,568,010 | 21 | | |
| 180,000-199,999 | 188,435 | 1 | 2,103,487 | 11 | 198,410 | 1 |
| 200,000-299,999 | 1,300,849 | 5 | 21,958,162 | 88 | 564,696 | 2 |
| 300,000-399,999 | 4,330,969 | 12 | 26,559,649 | 76 | 3,176,893 | 9 |
| 400,000-499,999 | 4,956,581 | 11 | 14,140,861 | 32 | 8,009,982 | 18 |
| 500,000-599,999 | 2,794,023 | 5 | 8,000,634 | 15 | 3,845,404 | 7 |
| 600,000-699,999 | 1,951,875 | 3 | 2,582,236 | 4 | 1,860,452 | 3 |
| 700,000-799,999 | 780,028 | 1 | 2,197,506 | 3 | 733,190 | 1 |
| 800,000-899,999 | 847,747 | 1 | 1,690,526 | 2 | | |
| 900,000-999,999 | | | | | | |
| 1,000,000-1,999,999 | | | | | 1,121,303 | 1 |
| 2,000,000 & Over | | | | | | |
| Total | \$17,972,794 | 49 | \$92,865,226 | 372 | \$19,894,967 | 48 |

Note: This table reflects fee-for-service data only.

Continued...

(1) A blank cell represents a zero value.

(2) These statistics cannot be used as an accurate measure of a practitioner's personal income, because they do not depict other sources of income and the figures quoted are payments from which practitioners pay business expenses, such as office and staff expenses.

Table 2.11
Distribution of Gross Payments by Payment Range and Specialty
for the Service Year April 1, 2007 to March 31, 2008⁽¹⁾⁽²⁾

| Dollar Range | Pathology | | Radiology | |
|---------------------|--------------------|----------------------|----------------------|----------------------|
| | Payments | Number of Physicians | Payments | Number of Physicians |
| Less than \$10,000 | 50,033 | 14 | 95,149 | 29 |
| 10,000- 19,999 | 12,418 | 1 | 38,118 | 3 |
| 20,000- 39,999 | | | 233,044 | 8 |
| 40,000- 59,999 | | | 248,211 | 5 |
| 60,000- 79,999 | 141,021 | 2 | 496,536 | 7 |
| 80,000- 99,999 | | | 520,698 | 6 |
| 100,000-119,999 | | | 546,254 | 5 |
| 120,000-139,999 | | | 248,371 | 2 |
| 140,000-159,999 | | | 619,775 | 4 |
| 160,000-179,999 | | | 861,463 | 5 |
| 180,000-199,999 | | | 577,002 | 3 |
| 200,000-299,999 | | | 2,966,190 | 12 |
| 300,000-399,999 | 340,183 | 1 | 6,583,493 | 19 |
| 400,000-499,999 | | | 7,668,747 | 17 |
| 500,000-599,999 | | | 7,024,175 | 13 |
| 600,000-699,999 | | | 7,134,745 | 11 |
| 700,000-799,999 | | | 15,065,542 | 20 |
| 800,000-899,999 | | | 9,594,913 | 11 |
| 900,000-999,999 | | | 11,447,501 | 12 |
| 1,000,000-1,999,999 | | | 85,318,201 | 63 |
| 2,000,000 & Over | 5,007,425 | 2 | 40,415,870 | 16 |
| Total | \$5,531,081 | 20 | \$197,703,997 | 271 |

Note: This table reflects fee-for-service data only.

(1) A blank cell represents a zero value.

(2) These statistics cannot be used as an accurate measure of a practitioner's personal income, because they do not depict other sources of income and the figures quoted are payments from which practitioners pay business expenses, such as office and staff expenses.

Table 2.12
Number of Full-Time Equivalent Physicians by Specialty
for the Service Year April 1, 2007 to March 31, 2008⁽¹⁾

| Physicians by Specialty | Number of Physicians | Number of Full-Time Equivalent Physicians ⁽²⁾ | Proportion of Full-Time Equivalent Physicians | | Average Payment per Full-Time Equivalent Physician | Number of Registered Persons per Full-Time Equivalent Physician |
|--|----------------------|--|---|-----------------------|--|---|
| | | | Above 60th Percentile | Below 40th Percentile | | |
| All Physicians (except Laboratory) ⁽³⁾ | 5,767 | 5,023.5 | 33.6 | 49.0 | \$301,678 | 692 |
| All Specialists (except GPs FPs & Laboratory) | 2,406 | 2,010.0 | 32.4 | 50.7 | 377,240 | 1,728 |
| Physicians by Specialty | | | | | | |
| Anaesthesiology | 312 | 283.9 | 35.9 | 45.8 | 324,821 | 12,239 |
| Cardiovascular and Thoracic Surgery | 29 | 18.2 | 27.6 | 62.1 | 698,447 | 190,879 |
| Dermatology | 39 | 36.9 | 35.9 | 46.2 | 653,724 | 94,223 |
| Emergency Medicine | 79 | 72.9 | 36.7 | 46.8 | 246,087 | 47,654 |
| General Family Physicians (GPs FPs) | 3,361 | 2,937.1 | 34.2 | 48.0 | 257,814 | 1,183 |
| - General Family Physicians | 3,145 | 2,748.0 | 34.1 | 48.1 | 257,306 | 1,264 |
| - Full Time Emergency Room Physicians | 182 | 165.6 | 35.7 | 46.2 | 273,155 | 20,973 |
| - Mental Health Generalists | 19 | 19.9 | 42.1 | 42.1 | 194,589 | 174,310 |
| - Other General Practice Physicians ⁽⁴⁾ | 15 | 18.2 | 33.3 | 46.7 | 56,511 | 191,405 |
| General Surgery | 170 | 140.0 | 32.4 | 51.2 | 429,869 | 24,811 |
| - General Surgery designated specialty | 155 | 127.3 | 32.3 | 51.6 | 432,830 | 27,283 |
| - Other General Surgery | 15 | 13.5 | 40.0 | 46.7 | 375,473 | 256,952 |
| Internal Medicine | 513 | 368.5 | 28.7 | 56.7 | 420,299 | 9,427 |
| - Internal Medicine designated specialty | 227 | 165.0 | 29.5 | 55.1 | 347,860 | 21,056 |
| - Cardiology | 62 | 51.7 | 33.9 | 48.4 | 702,580 | 67,234 |
| - Gastroenterology | 48 | 27.9 | 22.9 | 64.6 | 498,494 | 124,471 |
| - Infectious Diseases | 18 | 12.3 | 22.2 | 61.1 | 89,417 | 282,669 |
| - Other Internal Medicine | 158 | 108.0 | 27.9 | 57.0 | 427,811 | 32,179 |
| Neurology | 71 | 34.4 | 15.5 | 77.5 | 311,744 | 100,988 |
| Neurosurgery | 12 | N/A | N/A | N/A | N/A | N/A |
| Obstetrics-Gynaecology | 168 | 151.9 | 35.1 | 45.2 | 459,979 | 22,870 |
| Ophthalmology | 97 | 91.3 | 37.1 | 44.3 | 752,722 | 38,059 |
| Orthopaedic Surgery | 132 | 110.0 | 35.6 | 46.2 | 407,508 | 31,590 |
| Otolaryngology | 51 | 45.7 | 33.3 | 51.0 | 520,204 | 76,001 |
| Paediatrics | 232 | 174.2 | 28.5 | 55.6 | 236,567 | 19,938 |
| Physical Medicine and Rehabilitation | 32 | 31.3 | 40.6 | 40.6 | 191,120 | 110,990 |
| Plastic Surgery | 49 | 44.4 | 38.8 | 40.8 | 405,077 | 78,296 |
| Psychiatry | 372 | 333.9 | 36.3 | 45.4 | 278,111 | 10,404 |
| Urology | 48 | 43.6 | 35.4 | 45.8 | 455,890 | 79,606 |

Note: This table reflects fee-for-service data only.

(1) The average payments and percentage change for fee-for-services reflect the fact that some physician specialties are now being paid primarily through ARPs rather than through fee-for-service claims. Due to the change in payment method, average and median payments for these specialties have not been provided.

(2) Full-time equivalent (FTE) methodology is as follows:

Definition of a Full-Time Equivalent Practitioner: The definition is based on the methodology developed in 1984 by Health Canada.

Step 1: - Within each specialty or group of specialists, rank the amounts paid in ascending order; the lower and upper benchmarks are the payment values which correspond to the 40th and 60th percentile for those practitioners with claims in all four quarters of the fiscal year.

Step 2: - Count all physicians with payments within the lower and upper benchmark as one FTE.

- Count all physicians with payments below the lower benchmark as a fraction of a FTE equal to the ratio of his/her payments to the lower benchmark.

- Count all physicians with payments above the upper benchmark using a log-linear relationship, as one FTE plus the natural logarithm of the ratio of his/her payments to the upper benchmark. The reason for attributing diminishing weight to payments above the upper benchmark is to prevent outliers from seriously biasing the measure. This is not necessary on the lower benchmark because payments less than zero are not recorded and, as such, a natural barrier exists to prevent bias at the lower end.

- Since the benchmarks for the calculations of FTEs in past Statistical Supplements are re-calculated based on the payments within each given year, and payments over time are not adjusted for fee changes, the FTEs in this table should not be compared with those released in previous editions of the Statistical Supplement.

(3) Laboratory specialists (20 Pathology and 271 Radiology Physicians) are excluded.

(4) Other General Practice Physicians refers to community medicine, geriatric medicine and occupational medicine.

Table 2.13
Distribution of Physician Payments by Type of Service and Specialty
for the Service Year April 1, 2007 to March 31, 2008⁽¹⁾⁽²⁾

| Physicians by Specialty | Total | Consultations | Assessments | | Hospital Care Days |
|--|-----------------|---------------|---------------|---------------|--------------------|
| | | | Major | Other | |
| Total: All Physicians | \$1,718,717,022 | \$171,924,505 | \$121,392,231 | \$511,697,891 | \$52,926,243 |
| Subtotal | | | | | |
| All Physicians (except Pathology) | 1,713,185,942 | 171,641,046 | 121,392,231 | 511,686,512 | 52,926,243 |
| All Specialists (except GP FPs & Pathology) | 955,958,029 | 155,867,244 | 31,153,250 | 67,399,596 | 21,344,070 |
| Anaesthesiology | 92,200,290 | 3,329,336 | 47,456 | 2,890,719 | 18,941 |
| Cardiovascular and Thoracic Surgery | 12,713,313 | 902,829 | 15,338 | 171,999 | 177,881 |
| Dermatology | 24,101,728 | 5,426,538 | 1,020,162 | 3,457,266 | 30 |
| Emergency Medicine | 17,938,850 | 1,426,303 | 229,700 | 9,184,663 | 713 |
| General Family Physicians (GP FPs) | 757,227,912 | 15,773,802 | 90,238,981 | 444,286,916 | 31,582,111 |
| - General Family Physicians | 707,079,627 | 13,138,071 | 89,567,641 | 415,354,841 | 31,555,264 |
| - Full Time Emergency Room Physicians | 45,244,755 | 2,449,498 | 410,315 | 28,018,250 | 20,736 |
| - Mental Health Generalists | 3,878,128 | 24,282 | 205,578 | 154,701 | 6,020 |
| - Other General Practice Physicians ⁽³⁾ | 1,025,403 | 161,951 | 55,446 | 759,123 | 147 |
| General Surgery | 60,191,070 | 16,563,361 | 198,580 | 2,915,321 | 1,372,453 |
| - General Surgery designated specialty | 55,113,403 | 15,245,313 | 150,362 | 2,643,397 | 1,303,054 |
| - Other General Surgery | 5,077,667 | 1,318,048 | 48,218 | 271,923 | 69,399 |
| Internal Medicine | 154,890,576 | 49,805,202 | 2,342,512 | 11,720,832 | 14,711,339 |
| - Internal Medicine designated specialty | 57,394,565 | 25,737,686 | 1,217,905 | 6,963,301 | 10,022,126 |
| - Cardiology | 36,301,016 | 7,920,592 | 211,275 | 668,492 | 1,518,267 |
| - Endocrinology Metabolism | 143,754 | 13,270 | 363 | 4,633 | |
| - Gastroenterology | 13,911,410 | 6,419,484 | 76,883 | 651,229 | 487,057 |
| - Infectious Diseases | 1,098,798 | 749,521 | 24,223 | 211,653 | 97,919 |
| - Other Internal Medicine | 46,041,033 | 8,964,749 | 811,862 | 3,221,524 | 2,585,970 |
| Neurology | 10,723,089 | 7,645,079 | 147,374 | 766,316 | 495,977 |
| Neurosurgery | 386,112 | 14,079 | 90 | 3,142 | 60 |
| Obstetrics-Gynaecology | 69,872,091 | 12,525,565 | 2,029,212 | 10,868,982 | 506,312 |
| Ophthalmology | 68,709,060 | 7,993,319 | 11,661,284 | 4,517,622 | 3,484 |
| Orthopaedic Surgery | 44,813,785 | 9,716,410 | 304,480 | 3,114,887 | 226,133 |
| Otolaryngology | 23,779,746 | 5,166,937 | 299,379 | 1,072,725 | 24,179 |
| Paediatrics | 41,219,581 | 11,422,523 | 9,816,629 | 12,241,781 | 3,019,581 |
| Physical Medicine and Rehabilitation | 5,981,754 | 2,411,046 | 26,298 | 1,099,528 | 659,759 |
| Plastic Surgery | 17,972,794 | 2,200,815 | 546,719 | 1,215,353 | 14,072 |
| Psychiatry designated specialty | 92,865,226 | 13,303,539 | 2,310,573 | 437,007 | 7,894 |
| Urology | 19,894,967 | 5,794,342 | 149,330 | 1,654,711 | 105,256 |
| Laboratory Specialists | 203,235,077 | 47,480 | 8,134 | 78,120 | |
| - Pathology | 5,531,081 | 283,459 | | 11,380 | |
| - Radiology | 197,703,997 | 160,021 | 8,134 | 66,741 | |

Note: This table reflects fee-for-service data only.

(1) The payment totals by specialty have been rounded.

(2) A blank cell represents a zero value.

(3) Other General Practice Physicians refers to community medicine, geriatric medicine and occupational medicine.

Continued

Table 2.13
Distribution of Physician Payments by Type of Service and Specialty
for the Service Year April 1, 2007 to March 31, 2008⁽¹⁾⁽²⁾

| Physicians by Specialty | Special Calls | Psycho-therapy/ Counselling | Major Surgery | Minor Surgery |
|--|---------------|--------------------------------|---------------|---------------|
| Total: All Physicians | \$40,908,574 | \$108,907,695 | \$228,366,190 | \$23,432,029 |
| Subtotal | | | | |
| All Physicians (except Pathology) | 40,908,574 | 108,907,695 | 228,363,767 | 23,432,029 |
| All Specialists (except GP/FPs & Pathology) | 2,202,727 | 66,833,517 | 208,140,212 | 7,884,887 |
| Anaesthesiology | 10,532 | 559,246 | 55,305,919 | 1,366,078 |
| Cardiovascular and Thoracic Surgery | 6,695 | 3,986 | 10,751,679 | 8,074 |
| Dermatology | 2,096 | 348 | 6,191,204 | 1,997,733 |
| Emergency Medicine | 43,939 | 350,142 | 652,879 | 727,920 |
| General Family Physicians (GP/FPs) | 38,705,847 | 42,074,178 | 20,223,555 | 15,547,142 |
| - General Family Physicians | 38,626,818 | 38,378,258 | 18,972,440 | 13,029,374 |
| - Full Time Emergency Room Physicians | 65,226 | 669,144 | 1,250,962 | 2,502,277 |
| - Mental Health Generalists | 13,008 | 3,003,441 | 153 | 3,863 |
| - Other General Practice Physicians ⁽³⁾ | 795 | 23,334 | | 11,629 |
| General Surgery | 97,849 | 34,628 | 29,107,888 | 879,841 |
| - General Surgery designated specialty | 93,158 | 34,628 | 26,097,246 | 859,870 |
| - Other General Surgery | 4,691 | | 3,010,642 | 19,971 |
| Internal Medicine | 495,099 | 80,019 | 4,899,567 | 259,457 |
| - Internal Medicine designated specialty | 368,625 | 33,974 | 103,345 | 215,780 |
| - Cardiology | 62,763 | 34 | 4,325,606 | |
| - Endocrinology/Metabolism | | | | |
| - Gastroenterology | 16,976 | 493 | 29,524 | 21,814 |
| - Infectious Diseases | 1,511 | | 490 | |
| - Other Internal Medicine | 45,225 | 45,517 | 440,602 | 21,863 |
| Neurology | 20,951 | 2,310 | 6,809 | |
| Neurosurgery | | | 355,660 | |
| Obstetrics-Gynaecology | 1,171,046 | 137,461 | 9,982,895 | 69,687 |
| Ophthalmology | 164,513 | 34 | 27,574,931 | 149,056 |
| Orthopaedic Surgery | 19,448 | 17,758 | 30,890,889 | 115,716 |
| Otolaryngology | 21,664 | 346 | 7,682,820 | 1,612,923 |
| Paediatrics | 102,526 | 1,035,324 | 215,692 | 179,014 |
| Physical Medicine and Rehabilitation | 2,578 | 620,885 | 245 | 165 |
| Plastic Surgery | 12,785 | 137 | 13,239,378 | 465,406 |
| Psychiatry designated specialty | 7,875 | 63,970,332 | | 54 |
| Urology | 23,129 | 20,562 | 8,479,877 | 40,299 |
| Laboratory Specialists | | | 2,804,305 | 13,465 |
| - Pathology | | | 2,424 | |
| - Radiology | | | 2,801,881 | 13,465 |

Note: This table reflects fee-for-service data only.

(1) The payment totals by specialty have been rounded.

(2) A blank cell represents a zero value.

(3) Other General Practice Physicians refers to community medicine, geriatric medicine and occupational medicine.

Continued...

Table 2.13
Distribution of Physician Payments by Type of Service and Specialty
for the Service Year April 1, 2007 to March 31, 2008⁽¹⁾⁽²⁾

| Physicians by Specialty | Surgical Assistance | Anaesthesia | Obstetrical Services | Diagnostic & Therapeutic Services - Radiology |
|--|---------------------|--------------|----------------------|---|
| Total: All Physicians | \$3,291 | \$18,674,328 | \$40,944,597 | \$171,073,777 |
| Subtotal | | | | |
| All Physicians (except Pathology) | 3,291 | 18,674,328 | 40,944,597 | 171,073,777 |
| All Specialists (except GP/FPs & Pathology) | 664 | 15,663,104 | 25,300,442 | 170,461,426 |
| Anaesthesiology | 664 | 14,369,027 | 4,270,906 | 971,945 |
| Cardiovascular and Thoracic Surgery | | 34,169 | | |
| Dermatology | | 86,625 | | |
| Emergency Medicine | | 4,497 | 1,777 | |
| General/Family Physicians (GP/FPs) | 2,627 | 3,011,224 | 15,644,155 | 612,352 |
| - General/Family Physicians | 2,627 | 2,979,458 | 15,628,397 | 612,352 |
| - Full Time Emergency Room Physicians | | 31,636 | 15,613 | |
| - Mental Health Generalists | | 129 | 145 | |
| - Other General Practice Physicians ⁽³⁾ | | | | |
| General Surgery | | 8,170 | 49,157 | 37,702 |
| - General Surgery designated specialty | | 5,001 | 49,157 | 128 |
| - Other General Surgery | | 3,169 | | 37,574 |
| Internal Medicine | | 3,898 | 9,763 | 6,602,912 |
| - Internal Medicine designated specialty | | 827 | 440 | 132,426 |
| - Cardiology | | | | 6,136,923 |
| - Endocrinology/Metabolism | | | | 133 |
| - Gastroenterology | | 161 | | |
| - Infectious Diseases | | | | |
| - Other Internal Medicine | | 2,910 | 9,323 | 333,431 |
| Neurology | | 61,633 | | 399 |
| Neurosurgery | | | 12,836 | |
| Obstetrics-Gynaecology | | 7,948 | 20,935,856 | 4,888,178 |
| Ophthalmology | | 129 | 245 | 4,546,580 |
| Orthopaedic Surgery | | 77,022 | 750 | 31 |
| Otolaryngology | | 31,424 | 731 | 236 |
| Paediatrics | | 497 | 17,869 | 14,965 |
| Physical Medicine and Rehabilitation | | 319,676 | | |
| Plastic Surgery | | 3,585 | 347 | |
| Psychiatry designated specialty | | 283 | | |
| Urology | | 35,376 | 144 | |
| Laboratory Specialists | | 619,149 | | 153,398,477 |
| - Pathology | | | | |
| - Radiology | | 619,149 | | 153,398,477 |

Note: This table reflects fee-for-service data only.

(1) The payment totals by specialty have been rounded.

(2) A blank cell represents a zero value.

(3) Other General Practice Physicians refers to community medicine, geriatric medicine and occupational medicine.

Continued

Table 2.13
Distribution of Physician Payments by Type of Service and Specialty
for the Service Year April 1, 2007 to March 31, 2008⁽¹⁾⁽²⁾

| Physicians by Specialty | Laboratory Services | Other Diagnostic & Therapeutic Services | Special Services | Miscellaneous Services |
|--|---------------------|---|------------------|------------------------|
| Total: All Physicians | \$38,597,533 | \$156,546,247 | \$11,743,913 | \$21,577,978 |
| Subtotal | | | | |
| All Physicians (except Pathology) | 38,597,533 | 151,315,683 | 11,740,659 | 21,577,978 |
| All Specialists (except GP/FPs & Pathology) | 38,597,533 | 126,786,709 | 1,424,297 | 16,898,352 |
| Anaesthesiology | | 7,370,191 | 32,820 | 1,656,449 |
| Cardiovascular and Thoracic Surgery | | 535,042 | | 45,623 |
| Dermatology | | 5,745,067 | 2,904 | 171,756 |
| Emergency Medicine | | 5,101,719 | 89 | 214,505 |
| General Family Physicians (GP/FPs) | | 24,528,974 | 10,316,362 | 4,679,626 |
| - General Family Physicians | | 15,207,958 | 10,308,745 | 3,717,383 |
| - Full Time Emergency Room Physicians | | 9,314,129 | 992 | 495,976 |
| - Mental Health Generalists | | 303 | 324 | 466,174 |
| - Other General Practice Physicians ⁽³⁾ | | 6,584 | 6,300 | 93 |
| General Surgery | | 8,692,690 | 869 | 232,560 |
| - General Surgery designated specialty | | 8,411,035 | 524 | 220,528 |
| - Other General Surgery | | 281,654 | 346 | 12,032 |
| Internal Medicine | 3,542,318 | 58,538,743 | 32,842 | 1,846,073 |
| - Internal Medicine designated specialty | | 12,219,456 | 29,303 | 349,372 |
| - Cardiology | 3,417,033 | 11,999,167 | | 40,864 |
| - Endocrinology/Metabolism | 125,285 | 70 | | |
| - Gastroenterology | | 6,170,749 | 856 | 36,185 |
| - Infectious Diseases | | 12,153 | 1,156 | 172 |
| - Other Internal Medicine | | 28,137,147 | 1,528 | 1,419,480 |
| Neurology | | 1,475,139 | 26,230 | 74,873 |
| Neurosurgery | | 245 | | |
| Obstetrics-Gynaecology | | 5,487,301 | 1,198,667 | 62,982 |
| Ophthalmology | | 12,093,217 | 119 | 4,527 |
| Orthopaedic Surgery | | 253,234 | 31,054 | 45,973 |
| Otolaryngology | | 7,839,361 | 2,291 | 24,730 |
| Paediatrics | | 2,952,839 | 24,342 | 175,998 |
| Physical Medicine and Rehabilitation | | 748,439 | 70,102 | 23,033 |
| Plastic Surgery | | 262,743 | 7 | 11,447 |
| Psychiatry designated specialty | | 530,058 | 292 | 12,297,320 |
| Urology | | 3,581,798 | 1,183 | 8,959 |
| Laboratory Specialists | 35,055,215 | 10,809,447 | 3,740 | 1,546 |
| - Pathology | | 5,230,564 | 3,254 | |
| - Radiology | 35,055,215 | 5,578,883 | 486 | 1,546 |

Note: This table reflects fee-for-service data only.

(1) The payment totals by specialty have been rounded.

(2) A blank cell represents a zero value.

(3) Other General Practice Physicians refers to community medicine, geriatric medicine and occupational medicine.

Table 2.14
Physician Services and Payments per 1,000 Insured Persons
by Type of Service, and Age and Gender of Recipient,
for the Service Year April 1, 2007 to March 31, 2008⁽¹⁾⁽²⁾

| Age & Gender Service Type | | All Age Groups | | Under 1 | | 1 - 4 | |
|--|----------|----------------|------------------|--------------|------------------|--------------|------------------|
| | | Services | Amount Paid | Services | Amount Paid | Services | Amount Paid |
| Consultations | F | 538 | 54,030 | 685 | 88,710 | 263 | 25,412 |
| | M | 442 | 44,934 | 807 | 102,312 | 341 | 32,582 |
| Major Assessment | F | 576 | 41,728 | 1,622 | 128,609 | 579 | 43,446 |
| | M | 379 | 28,138 | 1,655 | 131,599 | 602 | 45,480 |
| Other Assessment | F | 4,734 | 175,423 | 3,902 | 163,854 | 3,280 | 126,291 |
| | M | 3,164 | 119,082 | 4,247 | 179,809 | 3,531 | 137,197 |
| Hospital Care Days | F | 460 | 16,071 | 833 | 38,811 | 96 | 4,480 |
| | M | 389 | 14,397 | 995 | 46,626 | 109 | 4,988 |
| Special Calls | F | 112 | 13,859 | 81 | 11,266 | 96 | 12,869 |
| | M | 78 | 9,686 | 102 | 13,998 | 107 | 14,326 |
| Psychotherapy Counselling | F | 979 | 36,637 | 10 | 422 | 27 | 1,186 |
| | M | 687 | 26,047 | 16 | 642 | 42 | 1,780 |
| Major Surgery | F | 967 | 66,827 | 368 | 32,599 | 240 | 15,426 |
| | M | 888 | 64,641 | 543 | 36,246 | 426 | 24,792 |
| Minor Surgery | F | 125 | 5,629 | 28 | 1,478 | 81 | 5,162 |
| | M | 146 | 7,864 | 42 | 2,507 | 121 | 8,261 |
| Surgical Assistance | F | -- | 1 | | | | |
| | M | -- | 1 | | | | |
| Anaesthesiology | F | 371 | 9,368 | 67 | 1,542 | 237 | 4,123 |
| | M | 48 | 1,371 | 75 | 1,760 | 259 | 4,528 |
| Obstetrical Services | F | 164 | 23,538 | | | | |
| | M | | | | | | |
| Diagnostic & Therapeutic Services, Radiology | F | 892 | 73,742 | 42 | 3,539 | 74 | 3,855 |
| | M | 374 | 24,675 | 60 | 4,627 | 85 | 4,188 |
| Laboratory Services | F | 81 | 15,470 | | | -- | 14 |
| | M | 25 | 6,738 | | | -- | 21 |
| Other Diagnostic & Therapeutic Services | F | 1,451 | 44,917 | 747 | 42,996 | 569 | 11,251 |
| | M | 1,270 | 45,208 | 950 | 54,880 | 707 | 13,332 |
| Special Services ⁽³⁾ | F | 431 | 6,153 | 2 | 14 | 15 | 198 |
| | M | 76 | 600 | 2 | 29 | 16 | 222 |
| Miscellaneous Services ⁽⁴⁾ | F | 166 | 6,140 | 25 | 845 | 17 | 606 |
| | M | 160 | 6,283 | 29 | 994 | 22 | 770 |
| Total | F | 12,047 | \$589,832 | 8,412 | \$514,686 | 5,575 | \$254,317 |
| | M | 8,128 | \$399,666 | 9,523 | \$576,031 | 6,367 | \$292,467 |

Note: This table reflects fee-for-service data only.

Continued...

(1) A blank cell represents a zero value.

(2) -- equals a non-zero value; actual value too small to be shown.

(3) Special Services include injections, immunizations, pap smears, insertion of IUD.

(4) Miscellaneous Services are a group of health services codes that don't fall into any other health service category.

Table 2.14
Physician Services and Payments per 1,000 Insured Persons
by Type of Service, and Age and Gender of Recipient,
for the Service Year April 1, 2007 to March 31, 2008⁽¹⁾⁽²⁾

| Age & Gender | | 5 - 14 | | 15 - 24 | | 25 - 44 | |
|--|---|----------|-------------|----------|-------------|----------|-------------|
| | | Services | Amount Paid | Services | Amount Paid | Services | Amount Paid |
| Service Type | F | | | | | | |
| | M | | | | | | |
| Consultations | F | 212 | 18,170 | 341 | 31,347 | 534 | 50,678 |
| | M | 297 | 24,764 | 220 | 20,031 | 282 | 27,141 |
| Major Assessment | F | 282 | 20,938 | 404 | 28,678 | 555 | 80,714 |
| | M | 298 | 22,327 | 176 | 12,738 | 216 | 15,540 |
| Other Assessment | F | 1,907 | 70,435 | 3,805 | 144,859 | 4,829 | 181,864 |
| | M | 1,902 | 71,981 | 1,793 | 69,508 | 2,243 | 85,176 |
| Hospital Care Days | F | 26 | 1,200 | 85 | 3,013 | 135 | 9,826 |
| | M | 29 | 1,347 | 60 | 2,211 | 104 | 3,893 |
| Special Calls | F | 53 | 6,801 | 113 | 15,634 | 108 | 29,945 |
| | M | 56 | 7,241 | 64 | 8,688 | 51 | 6,738 |
| Psychotherapy/Counselling | F | 234 | 8,786 | 735 | 27,903 | 1,158 | 88,414 |
| | M | 459 | 17,966 | 611 | 24,037 | 740 | 27,609 |
| Major Surgery | F | 226 | 13,126 | 412 | 24,435 | 797 | 99,284 |
| | M | 302 | 16,710 | 514 | 31,159 | 558 | 37,023 |
| Minor Surgery | F | 135 | 5,587 | 125 | 5,538 | 108 | 10,320 |
| | M | 147 | 7,541 | 157 | 9,742 | 127 | 7,319 |
| Surgical Assistance | F | | | -- | 4 | -- | 1 |
| | M | | | -- | 4 | -- | 1 |
| Anaesthesiology | F | 104 | 1,757 | 542 | 12,832 | 852 | 43,694 |
| | M | 120 | 2,021 | 18 | 411 | 15 | 592 |
| Obstetrical Services | F | 5 | 561 | 242 | 35,174 | 430 | 128,362 |
| | M | | | | | | |
| Diagnostic & Therapeutic Services, Radiology | F | 118 | 5,947 | 437 | 35,592 | 997 | 183,347 |
| | M | 122 | 5,496 | 199 | 10,008 | 292 | 17,814 |
| Laboratory Services | F | 2 | 415 | 7 | 1,825 | 21 | 9,648 |
| | M | 1 | 340 | 5 | 1,249 | 10 | 2,733 |
| Other Diagnostic & Therapeutic Services | F | 693 | 7,734 | 839 | 17,772 | 1,244 | 67,870 |
| | M | 870 | 9,156 | 552 | 13,890 | 789 | 22,456 |
| Special Services ⁽³⁾ | F | 23 | 261 | 387 | 5,919 | 581 | 19,127 |
| | M | 23 | 276 | 21 | 182 | 36 | 283 |
| Miscellaneous Services ⁽⁴⁾ | F | 65 | 2,514 | 143 | 5,882 | 123 | 10,036 |
| | M | 122 | 4,709 | 166 | 6,712 | 133 | 5,314 |
| Total | F | 4,084 | \$164,231 | 8,620 | \$396,408 | 12,471 | \$608,484 |
| | M | 4,747 | \$191,874 | 4,556 | \$210,572 | 5,596 | \$259,632 |

Note: This table reflects fee-for-service data only.

(1) A blank cell represents a zero value.

(2) -- equals a non-zero value; actual value too small to be shown.

(3) Special Services include injections, immunizations, pap smears, insertion of IUD.

(4) Miscellaneous Services are a group of health services codes that don't fall into any other health service category.

Continued...

Table 2.14
Physician Services and Payments per 1,000 Insured Persons
by Type of Service, and Age and Gender of Recipient,
for the Service Year April 1, 2007 to March 31, 2008⁽¹⁾⁽²⁾

| Age & Gender Service Type | | 45 - 64 | | 65 - 74 | | 75 and Older | |
|--|----------|---------------|------------------|---------------|--------------------|---------------|--------------------|
| | | Services | Amount Paid | Services | Amount Paid | Services | Amount Paid |
| Consultations | F | 624 | 63,568 | 942 | 102,010 | 1,151 | 128,400 |
| | M | 197 | 21,934 | 1,046 | 114,620 | 1,431 | 159,490 |
| Major Assessment | F | 628 | 44,313 | 813 | 59,896 | 1,009 | 80,233 |
| | M | 162 | 12,384 | 716 | 53,636 | 1,177 | 90,047 |
| Other Assessment | F | 4,785 | 175,677 | 6,951 | 252,082 | 11,456 | 404,379 |
| | M | 1,471 | 54,094 | 6,493 | 236,503 | 10,694 | 393,336 |
| Hospital Care Days | F | 285 | 10,736 | 1,101 | 39,492 | 4,284 | 141,022 |
| | M | 575 | 19,825 | 1,227 | 45,808 | 4,178 | 144,155 |
| Special Calls | F | 67 | 8,299 | 121 | 13,913 | 458 | 47,074 |
| | M | 50 | 5,490 | 132 | 15,403 | 366 | 39,920 |
| Psychotherapy/Counselling | F | 1,482 | 55,624 | 1,039 | 40,693 | 1,011 | 38,337 |
| | M | 141 | 5,178 | 729 | 28,068 | 1,025 | 37,648 |
| Major Surgery | F | 1,362 | 92,920 | 2,252 | 177,849 | 2,496 | 206,756 |
| | M | 428 | 36,185 | 2,628 | 209,868 | 3,114 | 263,113 |
| Minor Surgery | F | 132 | 5,923 | 163 | 6,923 | 181 | 8,081 |
| | M | 38 | 1,557 | 205 | 9,071 | 273 | 11,321 |
| Surgical Assistance | F | -- | 1 | | | | |
| | M | | | | | | |
| Anaesthesiology | F | 35 | 1,914 | 46 | 2,946 | 43 | 2,874 |
| | M | 6 | 370 | 41 | 2,540 | 44 | 2,687 |
| Obstetrical Services | F | 2 | 203 | 1 | 36 | -- | 4 |
| | M | | | | | | |
| Diagnostic & Therapeutic Services, Radiology | F | 1,325 | 108,384 | 1,607 | 127,634 | 1,393 | 106,780 |
| | M | 154 | 11,827 | 926 | 69,672 | 1,123 | 85,998 |
| Laboratory Services | F | 173 | 32,022 | 294 | 55,529 | 206 | 39,965 |
| | M | 15 | 4,010 | 104 | 28,034 | 111 | 29,155 |
| Other Diagnostic & Therapeutic Services | F | 1,883 | 61,316 | 2,918 | 114,135 | 3,161 | 139,815 |
| | M | 597 | 28,874 | 3,306 | 151,667 | 4,338 | 209,956 |
| Special Services ⁽³⁾ | F | 549 | 7,554 | 564 | 6,290 | 445 | 3,876 |
| | M | 54 | 407 | 278 | 2,111 | 396 | 2,962 |
| Miscellaneous Services ⁽⁴⁾ | F | 160 | 6,052 | 278 | 10,271 | 721 | 23,234 |
| | M | 90 | 3,211 | 256 | 10,451 | 655 | 23,348 |
| Total | F | 13,493 | \$674,505 | 19,089 | \$1,009,699 | 28,017 | \$1,370,831 |
| | M | 9,578 | \$485,111 | 18,086 | \$977,452 | 28,925 | \$1,493,135 |

Note: This table reflects fee-for-service data only.

(1) A blank cell represents a zero value.

(2) -- equals a non-zero value; actual value too small to be shown.

(3) Special Services include injections, immunizations, pap smears, insertion of IUD.

(4) Miscellaneous Services are a group of health services codes that don't fall into any other health service category.

Table 2.15
Percentage Changes to Rates in the Schedule of
Medical Benefits by Specialty for October 1, 2003 to March 31, 2008

| Effective Date Specialty | October 1, 2003 | October 1, 2004 | October 1, 2005 | October 1, 2006 | April 1, 2007 |
|--------------------------------------|-----------------|-----------------|-----------------|-----------------|---------------|
| Anaesthesia | 2.4 | 2.0 | 2.6 | 3.7 | 3.7 |
| Cardiology | 1.3 | 1.6 | 1.6 | 2.3 | 2.3 |
| Cardiovascular and Thoracic Surgery | 1.1 | 1.2 | 1.3 | 2.4 | 2.4 |
| Critical Care Medicine | 1.7 | 1.4 | 1.8 | 2.4 | 2.4 |
| Dermatology | 1.8 | 2.7 | 2.1 | 2.4 | 2.4 |
| Radiology | 1.4 | 2.2 | 1.9 | 3.1 | 3.1 |
| Emergency Medicine | 3.2 | 2.6 | 3.5 | 5.0 | 5.0 |
| Endocrinology/Metabolism | 6.4 | 5.0 | 5.3 | 7.2 | 7.2 |
| Gastroenterology | 2.1 | 3.0 | 2.4 | 4.5 | 4.5 |
| General Practice | 3.3 | 3.9 | 3.9 | 5.4 | 5.4 |
| General Surgery | 1.9 | 2.1 | 2.4 | 3.3 | 3.3 |
| Mental Health Generalists | 3.5 | 2.8 | 3.6 | 4.5 | 4.5 |
| Infectious Diseases | 7.7 | 5.0 | 5.3 | 7.7 | 7.7 |
| Internal Medicine | 3.1 | 3.9 | 3.8 | 5.5 | 5.5 |
| Nephrology | 2.2 | 2.5 | 2.7 | 2.7 | 2.7 |
| Neurology | 4.0 | 4.7 | 4.8 | 6.7 | 6.7 |
| Neurosurgery | 2.0 | 2.3 | 2.4 | 3.6 | 3.6 |
| Obstetrics-Gynaecology | 2.0 | 2.2 | 2.8 | 3.2 | 3.2 |
| Ophthalmology | 1.5 | 2.2 | 1.9 | 2.9 | 2.9 |
| Orthopaedic Surgery | 2.2 | 2.3 | 2.5 | 3.5 | 3.5 |
| Otolaryngology | 1.6 | 2.1 | 1.8 | 2.5 | 2.5 |
| Paediatrics | 4.2 | 4.9 | 4.8 | 7.2 | 7.2 |
| Pathology | 0.9 | 2.9 | 3.5 | 4.5 | 4.5 |
| Physical Medicine and Rehabilitation | 4.9 | 5.0 | 5.3 | 7.7 | 7.7 |
| Plastic Surgery | 2.1 | 2.3 | 2.5 | 3.5 | 3.5 |
| Psychiatry | 3.2 | 2.8 | 4.1 | 4.5 | 4.5 |
| Respiratory Medicine | 5.3 | 5.0 | 5.3 | 5.4 | 5.4 |
| Rheumatology | 4.3 | 5.0 | 5.3 | 5.7 | 5.7 |
| Urology | 2.0 | 2.1 | 2.4 | 3.1 | 3.1 |
| Vascular Surgery | 2.0 | 2.3 | 2.3 | 3.9 | 3.9 |
| All Physicians | 2.7% | 3.1% | 3.3% | 4.5% | 4.5% |

Table 2.16
Basic Health Services:
Percentage Changes to Rates in the Schedules of Benefits
for April 1, 2001 to March 31, 2008

| Type of Practitioner Effective Date | Medical | Dentists/Oral Surgeons | Chiropractors | Optometrists | Podiatrists |
|--|---------|---------------------------|---------------|--------------|-------------|
| | (%) | (%) | (%) | (%) | (%) |
| April 1, 2001 | 6.3 | Nil | Nil | 1.9 | Nil |
| August 1, 2001 | Nil | 8.1 | Nil | Nil | Nil |
| November 1, 2001 | 3.4 | Nil | Nil | Nil | Nil |
| April 1, 2002 | 10.9 | Nil | Nil | 2.0 | Nil |
| October 1, 2002 | 2.0 | Nil | Nil | Nil | Nil |
| April 1, 2003 | Nil | 3.9 | 2.0 | 3.9 | 2.9 |
| October 1, 2003 | 2.7 | Nil | Nil | Nil | Nil |
| April 1, 2004 | Nil | 3.9 | 2.5 | 2.9 | 2.9 |
| October 1, 2004 | 3.1 | Nil | Nil | Nil | Nil |
| April 1, 2005 | Nil | Nil | Nil | 2.9 | Nil |
| October 1, 2005 | 3.3 | Nil | Nil | Nil | Nil |
| April 1, 2006 | Nil | Nil | Nil | 4.0 | Nil |
| October 1, 2006 | 4.5 | 3.5 | 2.9 | Nil | Nil |
| April 1, 2007 | 4.5 | Nil | Nil | 4.5 | Nil |
| October 1, 2007 | Nil | 3.9 | 2.9 | Nil | Nil |

Did You Know?

Alberta's telehealth network includes over
300 telehealth sites across the province.
Approximately 50 clinical programs are making
health services more accessible.

Alternate Relationship Plans Description

In early 2003, Alberta Health and Wellness, the Alberta Medical Association and the regional health authorities of Alberta entered into a trilateral relationship and budget management process for strategic physician agreements via a Master Agreement that remains in effect until 2011. Alternate Relationship Plans (ARPs) are an important part of the Master Agreement.

The purpose of ARPs is to promote innovation in clinical service delivery, with the intention of enhancing the following five dimensions:

- recruitment and retention of physicians,
- team-based approach to service delivery,
- access to health services for Albertans,
- patient satisfaction, and
- value for money.

Model Type Definitions

Clinical Alternate Relationship Plans

- **Capitation Alternate Relationship Plan** - This model is used for the provision of family medicine or primary health care, with a pre-determined annual amount for each of its patients within a defined population and basket of services.
- **Contractual Type Alternate Relationship Plan** - Funding is based on a pre-negotiated amount, for a pre-determined level of services, over a specified period of time (e.g. one year).
- **Sessional Alternate Relationship Plan** - Under this model, the physician is paid an hourly rate for work during a set period of time for the provision of insured medical services within an organized program.

Academic Alternate Relationship Plans

Academic ARPs are pooled funding arrangements that provide alternate compensation under a contractual model for clinical practice and conditional grant funding to compensate physicians for their teaching, administrative and research roles. These agreements are vital in ensuring a stable and sustainable health professional supply for Alberta and have been successful in:

- attracting and retaining needed specialists to the province,
- supporting innovative clinical practice, and
- enhancing the quality of Alberta's medical education and research.

Academic ARPs are inclusive agreements that involve all relevant stakeholders including, but not limited to: the involved Universities and Faculties of Medicine, the participating physicians, Alberta Health and Wellness, the applicable regional health authorities, the Alberta Medical Association, other funding bodies, and related ministries such as Advanced Education.

Table 2.17
Alternate Relationship Plans (ARP) Summary by Type
for the Service Year April 1, 2007 to March 31, 2008⁽¹⁾

| ARP Type ⁽²⁾ | Total ⁽³⁾ |
|-----------------------------------|----------------------|
| Clinical ARP | 435 |
| Academic ARP ⁽⁴⁾ | 594 |
| Number of Physicians | 1,029 |
| Expenditures⁽⁵⁾ | \$147,163,837 |

(1) The physician counts are as of March 31, 2008.

(2) There was a total of 41 ARPs as at March 31, 2008.

(3) The physician total can fluctuate from month to month, and should be considered approximate. Physicians can participate in more than one ARP model type.

(4) A breakdown for physicians by General Practitioner and Specialists are not available.

(5) Total expenditures are for the fiscal year April 1, 2007 to March 31, 2008, as at September 4, 2008. This total represents the amount paid to ARPs and not the amount paid to individual physicians within an ARP.

Table 2.18
Out-of-Country Basic Health Services:
Distribution of Payments, Number of Services and Number of Discrete Patients
for the Service Year April 1, 2007 to March 31, 2008⁽¹⁾

| Practitioner Type | Total Out-of-Country | | | United States | | | Out-of-Country (except United States) | | |
|---------------------------|-----------------------|-----------------------------------|--------------------|-----------------------|-----------------------------------|------------------|--|-----------------------------------|--------------------|
| | Number of Services | Number of Discrete Patients | Payments | Number of Services | Number of Discrete Patients | Payments | Number of Services | Number of Discrete Patients | Payments |
| Physicians ⁽²⁾ | 22,037 | 8,420 | 1,105,204 | 1,300 | 309 | 101,378 | 20,737 | 8,347 | 1,003,827 |
| Dentists/Oral Surgeons | 4 | 1 | 393 | 4 | 1 | 393 | | | |
| Total | 22,041 | 8,421 | \$1,105,597 | 1,304 | 310 | \$101,770 | 20,737 | 8,347 | \$1,003,827 |

Note: This table reflects fee-for-service data only.

(1) The total discrete patients is a discrete overall patient count and not a sum.

(2) Does not include physician services which were paid under the Out-of-Country Health Services Program.

Out-of-Country Health Coverage

Out-of-country insured practitioner and hospital services received by Albertans are paid at rates approved by the Minister of Alberta Health and Wellness.

As of July 1, 2006 coverage for out-of-province and out-of-country podiatry, chiropractic and optometry services was discontinued.

Under certain circumstances, the Out-of-Country Health Services Committee and, when applicable, the Appeal Panel, considers funding the full cost of insured physician, dentist/oral surgeon and hospital services not available in Canada. The program has specific criteria that must be met for funding to be considered.

Table 2.19
Out-of-Country Health Services Program:
Applications Reviewed
for the Service Years Ended March 31, 2004 to March 31, 2008

| Status of Applications | Type of Service | | | | |
|-----------------------------------|--|-----------|-----------|-----------|---------------------|
| | Required services not available in Alberta | | | | |
| | 2003/2004 | 2004/2005 | 2005/2006 | 2006/2007 | 2007/2008 |
| Received | 95 | 100 | 86 | 84 | 85.0 |
| Approved | 44 | 34 | 44 | 47 | 55.0 |
| Approved on Appeal ⁽¹⁾ | 7 | 15 | 5 | 2 | 1.5 ⁽²⁾ |
| Denied | 44 | 51 | 37 | 35 | 28.5 ⁽²⁾ |

(1) Row added to show those approved by the Appeal Panel. Denied numbers have been adjusted for the years ending 2004 to 2007.

(2) Two applications submitted together on one application form; one approved, one denied.

Table 2.20
Out-of-Country Health Services Program:
Payments Made for Approved Applications
for the Service Years Ended March 31, 2004 to March 31, 2008

| Amount Paid (\$) | Type of Service | | | | |
|-------------------|--|-------------|-------------|-------------|-------------|
| | Required services not available in Alberta | | | | |
| | 2003/2004 | 2004/2005 | 2005/2006 | 2006/2007 | 2007/2008 |
| Total | \$2,599,326 | \$2,920,577 | \$1,934,320 | \$2,994,504 | \$3,545,854 |
| Medical Services | 628,958 | 505,307 | 416,416 | 1,000,667 | 657,403 |
| Hospital Services | 1,970,368 | 2,415,269 | 1,517,904 | 1,993,838 | 2,888,451 |

Primary Care Networks

Primary Care Networks (PCNs) are formed through formal arrangements between groups of primary care physicians and their regional health authorities. PCNs are organized to deliver a wide range of primary care services. They have the flexibility to design local programs that meet the needs of patients, while working within the provincial framework.

Primary care is the first point of contact people have with the health system, where health services are mobilized and coordinated to promote health, prevent illness, provide care for common illness and manage ongoing problems.

The goals of PCNs are to:

1. Improve access to primary care services for more Albertans.
2. Manage access to appropriate round-the-clock primary care services.
3. Increase the focus on health promotion and disease prevention, and on care for patients with medically complex problems or chronic illnesses.
4. Improve coordination of primary care services with hospital, long-term and specialty care.
5. Foster a team approach to providing primary care.

The first Primary Care Network to launch in Alberta was Edmonton Southside PCN on May 1, 2005.

Table 2.21
Primary Care Networks (PCNs):
Distribution by Health Region, Number of Primary Care Physicians, Number of Patients, and Total
Payments for the Service Year April 1, 2007 to March 31, 2008

| Primary Care Network | Health Region | Number of Primary Care Physicians ⁽¹⁾ | Number of Patients Enrolled ⁽²⁾ | Total Payments to the Primary Care Network ⁽³⁾⁽⁴⁾ |
|-------------------------------------|---|--|--|---|
| Chinook PCN | Chinook Regional Health Authority | 151 | 143,409 | 4,231,755 |
| Palliser PCN | Palliser Health Region | 48 | 70,161 | 2,168,533 |
| Calgary Foothills PCN | Calgary Health Region | 106 | 134,409 | 4,088,260 |
| Calgary Rural PCN | Calgary Health Region | 101 | 85,574 | 3,566,121 |
| Calgary West Central PCN | Calgary Health Region | 215 | 263,790 | 7,546,050 |
| Highland PCN | Calgary Health Region | 24 | 30,931 | 1,068,183 |
| South Calgary PCN | Calgary Health Region | 61 | 79,356 | 1,967,875 |
| Red Deer PCN | David Thompson Regional Health Authority | 64 | 102,790 | 2,589,436 |
| Rocky Mountain House PCN | David Thompson Regional Health Authority | 31 | 15,948 | 519,889 |
| Camrose PCN | East Central Health | 16 | 22,016 | 502,111 |
| Provost-Consort PCN | East Central Health David Thompson RHA | 32 | 6,095 | 172,625 |
| Edmonton North PCN | Capital Health | 106 | 176,061 | 7,527,306 |
| Edmonton Oliver PCN | Capital Health | 56 | 53,570 | 1,500,058 |
| Edmonton Southside PCN | Capital Health | 96 | 86,222 | 1,975,201 |
| Edmonton West PCN | Capital Health | 57 | 69,420 | 1,996,840 |
| Leduc-Beaumont-Devon PCN | Capital Health | 52 | 51,846 | 1,726,950 |
| St. Albert & Sturgeon PCN | Capital Health | 50 | 57,996 | 1,567,166 |
| Sherwood Park-Strathcona County PCN | Capital Health | 47 | 75,639 | 3,153,375 |
| WestView PCN | Capital Health | 70 | 62,253 | 1,480,543 |
| Bonnyville PCN | Aspen Regional Health Authority | 51 | 15,124 | 322,344 |
| St. Paul Aspen PCN | Aspen Regional Health Authority East Central Health | 7 | 10,494 | 346,907 |
| Peace River PCN | Peace Country Health | 18 | 11,594 | 644,020 |
| Sexsmith PCN | Peace Country Health | 4 | 6,505 | 215,528 |
| West Peace PCN | Peace Country Health | 4 | 7,984 | 265,927 |
| Northwest PCN | Northern Lights Health Region | 26 | 15,500 | 387,500 |
| Wood Buffalo PCN | Northern Lights Health Region | 26 | 44,687 | 1,130,058 |
| Total | | 1519 | 1,699,374 | \$52,660,560 |

(1) The term Primary Care Physician includes both family physicians and general practitioners. Physicians participating in PCNs continue to be compensated for insured medical services using either fee-for-service or existing alternate payment arrangements.

(2) Informal enrollment is based on a default method of calculating two patient encounters with a PCN health service provider at a PCN service delivery location for services included in Article 8, Schedule G of the Primary Care Initiative Agreement, in the past three years. Effective October 1, 2007 informal enrolment is based on assignment of discrete patients to PCNs based on overall volume of care to a single provider, however this enrolment number is based on the original method.

(3) PCNs operate within a mixed payment environment, receiving a capitation payment up to \$50 per patient per year. In addition, some PCNs are eligible for the following grants: Capacity Building Grants, Specialist Linkages and the Pharmacist Integration Pilot Project.

(4) Payment totals reflect an adjustment to change the semi-annual payment cycle to correspond with the fiscal year.

Section 3: Regional Data

Summary

This section provides practitioner fee-for-service data broken down by health region. Alberta has nine regional health authorities, which are responsible for hospitals, continuing care facilities, community health services and public health programs in Alberta. They work with communities to deliver health services, including mental health services, to local residents. Information about regional health authority services and costs is in the *Alberta Ministry of Health and Wellness Annual Report Section I and II 2007/2008*.

Highlights

- A total of 38 per cent of practitioner fee-for-service expenditures were for services received in the Calgary Health Region; 38 per cent for services received in the Capital Health region and the balance (24 per cent) for services received in the other seven health regions.
- An average of 69 per cent of payments for services received by patients were provided in the health region where the patient resides.

Figure 5
Map of Health Regions



Explanatory Notes

Number of Practitioners

Statistics shown for the number of practitioners in a region are based on the number of practitioners who received fee-for-service payments for services provided in that particular region. A practitioner may work in several regions and will have been counted in each region where he/she provided services.

Number of Services

Some health services listed in the schedules of benefits are paid based on time units. Where applicable, the number of services reported will be the number of time units paid.

Regional Boundary Changes

Regional boundaries are subject to change; therefore, year-over-year comparisons by region need to be interpreted with caution. The map on health regions shows the current boundaries which were put in place on December 1, 2003.

Service Location and Recipient Location

Data in this section is provided on a service location basis. Patients from rural and remote regions often travel to larger urban centres in other regions to receive services. This affects statistics shown for health services and payments for both regions involved. This point is illustrated in Table 3.2, which shows medical payments to physicians based on both service location and recipient location. Recipient location data is for the health region where the patient lived on the date of service.

Table 3.1
Distribution of Population Covered by Health Region Service Location
as at March 31, 2008⁽¹⁾

| Health Region Service Location | Registered Population | | |
|--|-----------------------|------------------|------------------|
| | Total | Male | Female |
| Chinook Regional Health Authority | 164,205 | 81,193 | 83,012 |
| Palliser Health Region | 107,100 | 53,765 | 53,335 |
| Calgary Health Region | 1,275,664 | 635,173 | 640,491 |
| David Thompson Regional Health Authority | 314,362 | 156,910 | 157,452 |
| East Central Health | 115,667 | 57,434 | 58,233 |
| Capital Health | 1,084,554 | 538,845 | 545,709 |
| Aspen Regional Health Authority | 183,501 | 93,238 | 90,263 |
| Peace Country Health | 145,760 | 74,429 | 71,331 |
| Northern Lights Health Region | 82,820 | 43,276 | 39,544 |
| Unknown | 363 | 195 | 168 |
| Total | 3,473,996 | 1,734,458 | 1,739,538 |

(1) The population figures are as at March 31, 2008, calculated in July 2008.

Did You Know?

Alberta Alcohol and Drug Abuse
Commission provided treatment services
to more than 36,000 Albertans.

Table 3.2
Distribution of Payments to Physicians by Health Region
Service Location and Recipient Location
for the Service Year April 1, 2007 to March 31, 2008⁽¹⁾

| Health Region Service Location | Health Region Recipient Location | | | | | |
|--|----------------------------------|-----------------------------------|------------------------|-----------------------|--|---------------------|
| | All Health Regions | Chinook Regional Health Authority | Palliser Health Region | Calgary Health Region | David Thompson Regional Health Authority | East Central Health |
| Chinook Regional Health Authority | 75,512,042 | 69,116,096 | 1,535,903 | 3,512,356 | 412,777 | 83,563 |
| Palliser Health Region | 47,352,286 | 607,426 | 45,241,898 | 741,264 | 286,531 | 59,989 |
| Calgary Health Region | 652,227,272 | 8,591,224 | 7,280,754 | 614,926,739 | 13,555,833 | 671,325 |
| David Thompson Regional Health Authority | 132,603,827 | 306,634 | 517,269 | 5,567,463 | 118,245,309 | 1,953,523 |
| East Central Health | 33,784,353 | 48,144 | 49,180 | 255,551 | 1,612,908 | 28,677,881 |
| Capital Health | 645,435,671 | 855,197 | 703,099 | 6,177,074 | 18,866,495 | 19,304,185 |
| Aspen Regional Health Authority | 50,242,692 | 63,919 | 58,066 | 345,119 | 443,903 | 599,141 |
| Peace Country Health | 51,683,636 | 86,472 | 50,056 | 408,024 | 345,684 | 79,678 |
| Northern Lights Health Region | 22,245,395 | 38,987 | 20,473 | 307,536 | 130,874 | 59,171 |
| Unknown | 7,629,850 | 106,487 | 73,436 | 1,929,324 | 216,689 | 4,178,418 |
| Total | \$1,718,717,023 | \$79,820,584 | \$55,530,134 | \$634,110,450 | \$154,117,003 | \$55,666,874 |

Note: This table reflects fee-for-service data only.

(1) The sums of the payments may not match the totals due to rounding.

Continued...

Table 3.2
Distribution of Payments to Physicians by Health Region
Service Location and Recipient Location
for the Service Year April 1, 2007 to March 31, 2008⁽¹⁾

| Health Region Service Location | Health Region Recipient Location | | | | |
|--|----------------------------------|---------------------------------|----------------------|-------------------------------|--------------------|
| | Capital Health | Aspen Regional Health Authority | Peace Country Health | Northern Lights Health Region | Unknown |
| Chinook Regional Health Authority | 437,816 | 127,850 | 115,594 | 105,179 | 64,906 |
| Palliser Health Region | 197,900 | 74,098 | 50,334 | 39,621 | 53,226 |
| Calgary Health Region | 4,224,217 | 852,536 | 804,815 | 663,741 | 656,089 |
| David Thompson Regional Health Authority | 4,221,983 | 981,013 | 502,736 | 237,207 | 130,689 |
| East Central Health | 1,934,526 | 983,087 | 95,947 | 70,307 | 56,822 |
| Capital Health | 545,385,965 | 36,300,014 | 10,372,327 | 6,886,751 | 584,565 |
| Aspen Regional Health Authority | 2,682,043 | 44,489,454 | 1,121,602 | 380,146 | 59,300 |
| Peace Country Health | 860,764 | 541,646 | 48,059,157 | 1,190,712 | 61,443 |
| Northern Lights Health Region | 810,213 | 245,355 | 150,202 | 20,439,790 | 42,793 |
| Unknown | 548,811 | 384,393 | 97,938 | 41,875 | 52,477 |
| Total | \$561,304,238 | \$84,979,445 | \$61,370,653 | \$30,055,330 | \$1,762,311 |

Note: This table reflects fee-for-service data only.

(1) The sums of the payments may not match the totals due to rounding.

Table 3.3
Distribution of Payments by International Classification
of Diseases and Health Region Service Location
for the Service Year April 1, 2007 to March 31, 2008

| Health Region Service Location | All Health Regions | Chinook Regional Health Authority | Palliser Health Region | Calgary Health Region | David Thompson Regional Health Authority | East Central Health |
|--|------------------------|-----------------------------------|------------------------|-----------------------|--|---------------------|
| International Classification of Diseases | | | | | | |
| Infectious and Parasitic Diseases | 27,838,512 | 1,272,093 | 866,251 | 10,509,312 | 2,676,199 | 717,420 |
| Neoplasms | 58,545,159 | 2,703,704 | 1,690,469 | 21,819,232 | 3,340,641 | 982,044 |
| Endocrine, Nutritional and Metabolic Diseases and Immunity Disorders | 47,825,697 | 2,259,633 | 2,284,904 | 15,826,827 | 3,644,483 | 1,179,837 |
| Diseases of Blood and Blood Forming Organs | 7,703,269 | 493,206 | 325,535 | 2,781,992 | 658,962 | 219,563 |
| Mental Disorders | 173,540,442 | 7,259,309 | 4,057,664 | 63,935,007 | 15,452,436 | 2,892,105 |
| Diseases of the Nervous System and Sense Organs | 117,500,050 | 5,017,728 | 3,882,436 | 47,485,816 | 6,734,319 | 1,984,447 |
| Diseases of the Circulatory System | 120,189,595 | 4,502,186 | 3,401,138 | 41,932,914 | 7,962,860 | 2,649,486 |
| Diseases of the Respiratory System | 109,180,935 | 4,766,874 | 2,911,384 | 39,226,497 | 9,710,001 | 2,586,593 |
| Diseases of the Digestive System | 63,499,404 | 3,364,110 | 2,177,800 | 20,052,197 | 6,388,746 | 2,274,932 |
| Diseases of the Genitourinary System | 83,605,739 | 4,376,957 | 2,255,479 | 32,233,915 | 7,597,508 | 1,971,891 |
| Complications of Pregnancy, Childbirth and the Puerperium | 55,670,634 | 2,712,786 | 1,149,921 | 23,343,452 | 4,755,936 | 1,024,704 |
| Diseases of the Skin and Subcutaneous Tissue | 47,479,274 | 1,829,853 | 1,330,115 | 17,579,000 | 4,144,990 | 1,080,971 |
| Diseases of the Musculoskeletal System and Connective Tissue | 84,787,933 | 4,775,880 | 2,971,615 | 28,740,441 | 7,285,001 | 2,426,612 |
| Congenital Anomalies | 5,341,230 | 116,569 | 51,846 | 1,851,164 | 253,609 | 29,260 |
| Certain Conditions Originating in the Perinatal Period | 7,765,852 | 507,910 | 299,594 | 2,908,824 | 956,854 | 47,296 |
| Symptoms, Signs and Ill-Defined Conditions | 177,700,747 | 8,481,329 | 4,727,204 | 65,942,964 | 15,612,048 | 4,080,599 |
| Injury and Poisoning | 93,512,271 | 4,391,971 | 2,464,773 | 31,570,398 | 8,935,909 | 2,325,142 |
| Non-Standard Diagnostic Codes ⁽¹⁾ | 143,217,991 | 5,531,528 | 4,196,527 | 54,707,738 | 11,768,091 | 3,505,986 |
| Unknown Diagnostic Chapter ⁽²⁾ | 293,812,288 | 11,148,415 | 6,307,633 | 129,779,581 | 14,725,233 | 1,805,462 |
| Total | \$1,718,717,023 | \$75,512,042 | \$47,352,286 | \$652,227,272 | \$132,603,827 | \$33,784,353 |

Note: This table reflects fee-for-service data only.

(1) Non-Standard Diagnostic Codes are supplementary diagnostic codes to the International Classification of Diseases, i.e., V codes.

(2) Radiologists, pathologists, surgical assistants and anaesthesiologists do not have to provide diagnostic codes when submitting claims to AHCP. Claims for these services are included under "Unknown Diagnostic Chapter."

Continued...

Table 3.3
Distribution of Payments by International Classification
of Diseases and Health Region Service Location
for the Service Year April 1, 2007 to March 31, 2008

| Health Region Service Location International Classification of Diseases | Capital Health | Aspen Regional Health Authority | Peace Country Health | Northern Lights Health Region | Unknown |
|--|-----------------------|--|---------------------------------|--|--------------------|
| Infectious and Parasitic Diseases | 9,025,155 | 1,211,302 | 967,365 | 457,536 | 135,880 |
| Neoplasms | 24,474,451 | 1,189,966 | 1,343,799 | 388,712 | 612,143 |
| Endocrine, Nutritional and Metabolic Diseases and Immunity Disorders | 18,082,119 | 1,911,615 | 1,573,533 | 813,832 | 248,913 |
| Diseases of Blood and Blood Forming Organs | 2,475,014 | 368,941 | 215,845 | 101,284 | 62,928 |
| Mental Disorders | 71,374,586 | 2,639,133 | 3,351,347 | 1,526,674 | 1,052,180 |
| Diseases of the Nervous System and Sense Organs | 44,891,477 | 2,557,557 | 3,762,991 | 858,814 | 324,464 |
| Diseases of the Circulatory System | 52,052,768 | 3,393,547 | 2,654,583 | 1,058,111 | 582,003 |
| Diseases of the Respiratory System | 38,226,890 | 5,350,758 | 3,921,396 | 1,973,354 | 507,187 |
| Diseases of the Digestive System | 21,630,156 | 2,856,855 | 3,109,862 | 1,156,139 | 488,607 |
| Diseases of the Genitourinary System | 28,640,531 | 2,709,380 | 2,363,912 | 1,124,059 | 332,107 |
| Complications of Pregnancy, Childbirth and the Puerperium | 16,313,278 | 2,063,898 | 1,967,251 | 1,913,480 | 425,927 |
| Diseases of the Skin and Subcutaneous Tissue | 17,272,890 | 2,059,909 | 1,295,850 | 693,052 | 192,644 |
| Diseases of the Musculoskeletal System and Connective Tissue | 29,511,080 | 4,407,298 | 3,520,642 | 909,684 | 239,680 |
| Congenital Anomalies | 2,826,707 | 41,002 | 129,167 | 23,508 | 18,398 |
| Certain Conditions Originating in the Perinatal Period | 1,745,325 | 179,416 | 868,371 | 181,007 | 71,255 |
| Symptoms, Signs and Ill-Defined Conditions | 63,035,139 | 5,169,474 | 6,469,271 | 3,351,779 | 830,940 |
| Injury and Poisoning | 33,206,068 | 4,710,389 | 3,979,944 | 1,417,773 | 509,902 |
| Non-Standard Diagnostic Codes ⁽¹⁾ | 47,394,718 | 5,958,109 | 6,559,993 | 2,987,652 | 607,650 |
| Unknown Diagnostic Chapter ⁽²⁾ | 123,257,321 | 1,464,142 | 3,628,512 | 1,308,946 | 387,043 |
| Total | \$645,435,671 | \$50,242,692 | \$51,683,636 | \$22,245,395 | \$7,629,850 |

Note: This table reflects fee-for-service data only.

(1) Non-Standard Diagnostic Codes are supplementary diagnostic codes to the International Classification of Diseases; i.e., V codes.

(2) Radiologists, pathologists, surgical assistants and anaesthesiologists do not have to provide diagnostic codes when submitting claims to AHCIIP. Claims for these services are included under "Unknown Diagnostic Chapter."

Table 3.4
Distribution of Physicians with Total Payments of \$10,000 and Over, and Average Payments
by Health Region Service Location
for the Service Year April 1, 2007 to March 31, 2008^(1&2)

| Health Region Service Location | Total | | | General Family Physicians | | | Specialists ⁽³⁾ | | |
|--|----------------------|----------------------|------------------|---------------------------|----------------------|------------------|----------------------------|----------------------|------------------|
| | Number of Physicians | Amount Paid | Average Payments | Number of Physicians | Amount Paid | Average Payments | Number of Physicians | Amount Paid | Average Payments |
| Chinook Regional Health Authority | 269 | 68,002,046 | 252,796 | 171 | 37,305,740 | 218,162 | 98 | 30,696,306 | 313,228 |
| Palliser Health Region | 176 | 43,157,570 | 245,213 | 99 | 25,400,241 | 256,568 | 77 | 17,757,329 | 230,615 |
| Calgary Health Region | 2,253 | 559,562,789 | 248,363 | 1,280 | 260,775,749 | 203,731 | 973 | 298,787,040 | 307,078 |
| David Thompson Regional Health Authority | 480 | 122,466,588 | 255,139 | 334 | 80,967,189 | 242,417 | 146 | 41,499,399 | 284,242 |
| East Central Health | 178 | 32,222,607 | 181,026 | 139 | 25,650,397 | 184,535 | 39 | 6,572,210 | 168,518 |
| Capital Health | 1,935 | 559,414,997 | 289,103 | 1,014 | 227,475,033 | 224,334 | 921 | 331,939,964 | 360,413 |
| Aspen Regional Health Authority | 248 | 49,853,619 | 201,023 | 206 | 44,568,799 | 216,357 | 42 | 5,284,821 | 125,829 |
| Peace Country Health | 208 | 48,232,141 | 231,885 | 147 | 32,378,405 | 220,261 | 61 | 15,853,737 | 259,897 |
| Northern Lights Health Region | 107 | 22,121,353 | 206,742 | 76 | 15,976,280 | 210,214 | 31 | 6,145,073 | 198,228 |
| Unknown | 100 | 6,663,855 | 66,639 | 62 | 4,248,128 | 68,518 | 38 | 2,415,728 | 63,572 |
| Total | 5,954 | 1,511,697,566 | 253,896 | 3,528 | \$754,745,960 | \$213,930 | 2,426 | \$756,951,606 | \$312,016 |

Note: This table reflects fee-for-service data only.

(1) This report reflects discrete physician counts of physicians within each region. The numbers are not a sum as a physician may provide health services in multiple health regions.

(2) The total amount paid may not match the sum of amounts paid due to rounding.

(3) Excludes pathology and radiology laboratory specialists because billings for more than one physician may be included under one physician billing number.

Table 3.5

**Number of General Family Physicians by Payment Range and Health Region Service Location
for the Service Year April 1, 2007 to March 31, 2008⁽¹⁾⁽²⁾**

| Health Region Service Location Payment Range | All Health Regions | Chinook Regional Health Authority | Palliser Health Region | Calgary Health Region | David Thompson Regional Health Authority | East Central Health | Capital Health | Aspen Regional Health Authority | Peace Country Health | Northern Lights Health Region | Unknown |
|---|-----------------------|--|------------------------------|-----------------------------|--|------------------------|-------------------|--|----------------------------|--|------------|
| Less than \$10,000 | 1,630 | 87 | 66 | 243 | 145 | 109 | 226 | 131 | 82 | 45 | 496 |
| 10,000- 19,999 | 208 | 20 | 9 | 48 | 27 | 21 | 23 | 18 | 12 | 10 | 20 |
| 20,000- 39,999 | 249 | 10 | 5 | 84 | 26 | 20 | 50 | 16 | 17 | 10 | 11 |
| 40,000- 59,999 | 176 | 10 | 10 | 57 | 10 | 7 | 50 | 10 | 12 | 5 | 5 |
| 60,000- 79,999 | 163 | 6 | 2 | 70 | 11 | 6 | 41 | 12 | 5 | 6 | 4 |
| 80,000- 99,999 | 158 | 10 | 2 | 65 | 13 | 5 | 47 | 6 | 3 | 3 | 4 |
| 100,000-119,999 | 164 | 2 | 5 | 73 | 9 | 5 | 50 | 7 | 6 | 3 | 4 |
| 120,000-139,999 | 163 | 5 | 3 | 68 | 10 | 7 | 51 | 9 | 3 | 3 | 4 |
| 140,000-159,999 | 175 | 1 | 3 | 82 | 9 | 2 | 53 | 11 | 7 | 4 | 3 |
| 160,000-179,999 | 167 | 4 | 1 | 76 | 6 | 3 | 66 | 7 | | | 4 |
| 180,000-199,999 | 163 | 3 | 4 | 72 | 13 | 3 | 58 | 5 | 5 | | |
| 200,000-299,999 | 829 | 44 | 10 | 329 | 72 | 20 | 280 | 33 | 30 | 8 | 3 |
| 300,000-399,999 | 519 | 38 | 21 | 145 | 76 | 22 | 139 | 48 | 22 | 8 | |
| 400,000-499,999 | 245 | 11 | 14 | 68 | 32 | 14 | 62 | 17 | 19 | 8 | |
| 500,000-599,999 | 89 | 4 | 6 | 25 | 17 | 4 | 21 | 5 | 3 | 4 | |
| 600,000-699,999 | 35 | 3 | 3 | 10 | 2 | | 11 | 2 | 2 | 2 | |
| 700,000-799,999 | 14 | | 1 | 4 | | | 8 | | | 1 | |
| 800,000-899,999 | 5 | | | 2 | | | 1 | | 1 | 1 | |
| 900,000-999,999 | 1 | | | 1 | | | | | | | |
| 1,000,000 & over | 5 | | | 1 | 1 | | 3 | | | | |
| Total | 5,158 | 258 | 165 | 1,523 | 479 | 248 | 1,240 | 337 | 229 | 121 | 558 |

Note: This table reflects fee-for-service data only.

(1) This report reflects discrete physician counts of physicians within each region where the physician payment was greater than zero within the health region. The numbers are not a sum as a physician may provide health services in multiple health regions.

(2) A blank cell represents a zero value.

Table 3.6
Number of Physicians by Specialty Within the Health Regions
for the Service Year April 1, 2007 to March 31, 2008⁽¹⁾⁽²⁾

| Physicians by Specialty | Number of Physicians ⁽³⁾ | | | |
|---|-------------------------------------|----------------|-----------------------|-------------------|
| | All Health Regions | Capital Health | Calgary Health Region | All Other Regions |
| Total: All Physicians | 8,475 | 2,290 | 2,626 | 3,559 |
| All Specialists (except GP/FPs & laboratory specialists) | 3,317 | 1,050 | 1,103 | 1,164 |
| Physicians by Specialty | | | | |
| Anaesthesiology | 365 | 136 | 146 | 83 |
| Cardiovascular and Thoracic Surgery | 34 | 17 | 12 | 5 |
| Dermatology | 50 | 19 | 18 | 13 |
| Emergency Medicine | 96 | 35 | 43 | 18 |
| General Family Physicians (GP/FPs) | 5,158 | 1,240 | 1,523 | 2,395 |
| General Surgery | 296 | 62 | 71 | 163 |
| Internal Medicine | 733 | 274 | 199 | 260 |
| Neurology | 96 | 21 | 48 | 27 |
| Neurosurgery | 12 | 6 | 6 | |
| Obstetrics-Gynaecology | 244 | 67 | 80 | 97 |
| Ophthalmology | 118 | 39 | 46 | 33 |
| Orthopaedic Surgery | 184 | 44 | 65 | 75 |
| Otolaryngology | 60 | 22 | 21 | 17 |
| Paediatrics | 352 | 74 | 128 | 150 |
| Physical Medicine and Rehabilitation | 38 | 17 | 13 | 8 |
| Plastic Surgery | 69 | 17 | 24 | 28 |
| Psychiatry | 502 | 175 | 166 | 161 |
| Urology | 68 | 25 | 17 | 26 |

Note: This table reflects fee-for-service data only.

(1) This report reflects discrete physician counts of physicians within each region where the physician payment was greater than greater than zero within the health region. The numbers are not a sum as physicians may provide health services in multiple health regions.

(2) A blank cell represents a zero value.

(3) Excludes pathology and radiology laboratory specialists because billings for more than one physician may be included under one physician billing number.

Alberta Health Services:

Distribution of Services and Payments by Health Region Service Location for the Service Year April 1, 2007 to March 31, 2008⁽¹⁾

| Health Region Service Location | Total | | Chiropractors | | Optometrists | | Dentists/Oral Surgeons | | Podiatrists | |
|--|------------------|---------------------|------------------|---------------------|----------------|---------------------|------------------------|--------------------|----------------|--------------------|
| | Services | Payments | Services | Payments | Services | Payments | Services | Payments | Services | Payments |
| Chinook Regional Health Authority | 235,992 | 4,438,231 | 186,234 | 2,559,390 | 28,870 | 1,265,792 | 92 | 10,109 | 20,796 | 602,941 |
| Palliser Health Region | 139,217 | 2,532,786 | 109,447 | 1,501,592 | 18,378 | 791,433 | 24 | 2,437 | 11,368 | 237,324 |
| Calgary Health Region | 1,692,326 | 31,927,700 | 1,388,864 | 19,004,359 | 170,991 | 7,386,643 | 7,486 | 1,670,633 | 124,985 | 3,866,065 |
| David Thompson Regional Health Authority | 481,403 | 8,783,305 | 403,847 | 5,614,228 | 63,376 | 2,770,784 | 243 | 34,178 | 13,937 | 364,115 |
| East Central Health | 132,939 | 2,550,265 | 108,299 | 1,491,888 | 23,452 | 1,019,801 | 16 | 2,440 | 1,172 | 36,136 |
| Capital Health | 1,177,619 | 24,431,204 | 902,207 | 12,372,631 | 163,414 | 7,194,269 | 8,880 | 2,190,580 | 103,118 | 2,673,724 |
| Aspen Regional Health Authority | 143,698 | 2,747,721 | 117,186 | 1,612,158 | 24,291 | 1,072,547 | 18 | 2,296 | 2,203 | 60,720 |
| Peace Country Health | 100,043 | 1,980,825 | 79,442 | 1,093,227 | 18,574 | 825,849 | 9 | 1,168 | 2,018 | 60,581 |
| Northern Lights Health Region | 41,802 | 802,807 | 33,383 | 459,635 | 6,970 | 299,024 | 1 | 135 | 1,448 | 44,013 |
| Unknown | 12,718 | 312,929 | 214 | 2,892 | 268 | 12,657 | | | 12,236 | 297,380 |
| Total | 4,157,757 | \$80,507,774 | 3,329,123 | \$45,711,999 | 518,584 | \$22,638,799 | 16,769 | \$3,913,975 | 293,281 | \$8,243,000 |

Note: This table reflects fee-for-service data only.

(1) The payment totals may not match the sum of the payments made to the health regions due to rounding.

(2) A blank cell represents a zero value.

Section 4: Non-Group Supplementary Plans

Summary

Non-Group Supplementary plans provide coverage for prescribed drugs and selected health services. These supplementary plans are funded by Alberta Health and Wellness and administered by Alberta Blue Cross. Albertans under the age of 65 can purchase Non-Group Supplementary Coverage. Reduced Non-Group premium rates are available to those who apply and are eligible for Alberta Health Care Insurance Plan (AHCIP) premium subsidy. Premium-free coverage is offered to seniors and their dependants, and to recipients of the Alberta Widows' Pension Program and their dependants. Premium-free drug coverage is also provided to people who have been diagnosed as being palliative and receive their health care at home rather than at a hospital.

The government-sponsored Non-Group Supplementary Health Plans are collectively referred to as "non-group" plans to distinguish them from the "group" or employer-sponsored and individual supplementary benefit plans available through Alberta Blue Cross and other insurers.

The data in this section include the number of persons covered by level of premium payment, by age and gender, and by types of services (ambulance, drugs, hospital accommodation, or other). Information is also provided about the number, types and costs of drug prescriptions, and the top ten drug expenditures.

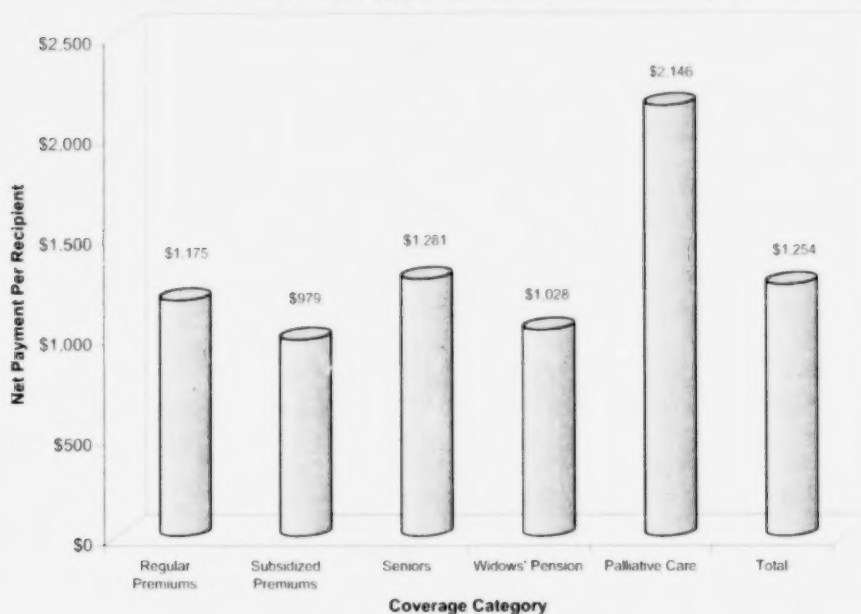
Highlights

- In 2007/2008, the number of Albertans who were covered under Non-Group Supplementary plans increased to 558,439, an increase of 3 per cent compared to 2006/2007.
- The number of persons who paid full premium rates was 107,100 (19 per cent of the total non-group membership), an increase of 6 per cent compared to 2006/2007.
- A total of 38,826 people (7 per cent of the total non-group membership) received non-group coverage at reduced premium rates, a decrease of 9 per cent compared to 2006/2007.
- A total of 412,513 people (74 per cent of total non-group membership) received their coverage premium-free, an increase of 3 per cent compared to 2006/2007.
- More than \$632 million was paid for benefits under the Non-Group Supplementary plans in 2007/2008, an increase of 4 per cent compared to 2006/2007.
- More than \$490 million was paid for benefits for seniors and their dependants. These payments accounted for 77 per cent of the total amount spent on the Non-Group Supplementary plans, an increase of more than 3 per cent compared to 2006/2007.
- Drugs accounted for almost \$607 million or 96 per cent of total non-group benefit expenditures. Ambulance services accounted for over \$20 million or 3 per cent of the total.
- An ulcer treatment drug, Pantoloc (40mg), had the highest expenditures with a total of 210,206 prescriptions and an expenditure of \$24,052,441.

- In 2007/2008, the ten highest expenditure drugs were used to treat common chronic conditions including:
 - Gastro-intestinal ulcers and acid-related conditions were treated using Pantoloc, Prevacid and Apo-Omeprazole (capsule).
 - High cholesterol conditions were treated using Lipitor (in three strengths).
 - High blood pressure and/or angina (chest pain) was treated using Norvasc (in two strengths).
 - Prevention of heart attack and stroke were treated using Plavix.
 - Multiple Sclerosis was treated using Copaxone.

Figure 6 illustrates average net payments for drugs per recipient, sorted by Non-Group Supplementary coverage category for the service year April 1, 2007 to March 31, 2008.

Figure 6
Non-Group Supplementary Coverage:
Average Net Payment for Drugs per Recipient by Coverage Category
for the Service Year April 1, 2007 to March 31, 2008



Explanatory Notes

Data

Data in this section are provided by Alberta Health and Wellness (Tables 4.1 - 4.3), Alberta Blue Cross (Figure 6, Tables 4.4 - 4.5 and Tables 4.7 - 4.9), and the Alberta College of Pharmacists (Table 4.6).

Non-Group Coverage Parameters

Non-group coverage includes drugs, some ambulance services, clinical psychological services, some home nursing care, prosthetic and orthotic benefits, and mastectomy prostheses. Coverage for private or semi-private hospital accommodation is included in the plan offered to Albertans under the age of 65 and their eligible dependants. The Alberta Health and Wellness Drug Benefit List defines the drugs that are covered by the Non-Group Supplementary plans.

Table 4.1
Non-Group Supplementary Coverage:
Number of Registrations and Persons Covered by Level of Premium Payment
as at March 31, 2004, 2005, 2006, 2007 and 2008⁽¹⁾

| Premium Level | Registration Status | Number of Registrations & Persons Covered | | | | | Percentage Change | | | |
|----------------------------|---------------------|---|---------|---------|---------|---------|-------------------|---------------|---------------|---------------|
| | | 2004 | 2005 | 2006 | 2007 | 2008 | 2005/ 2004 | 2006/ 2005 | 2007/ 2006 | 2008/ 2007 |
| Regular Premiums | Registrations | 45,948 | 47,577 | 47,582 | 48,631 | 51,848 | 3.55 | 0.01 | 2.20 | 6.62 |
| | Persons | 96,003 | 99,025 | 98,704 | 101,077 | 107,100 | 3.15 | (0.32) | 2.40 | 5.96 |
| Reduced Premiums | Registrations | 18,999 | 19,441 | 21,222 | 22,445 | 20,703 | 2.33 | 9.16 | 5.76 | (7.76) |
| | Persons | 37,776 | 38,057 | 40,852 | 42,598 | 38,826 | 0.74 | 7.34 | 4.27 | (8.85) |
| No Premiums ⁽²⁾ | Registrations | 250,268 | 258,530 | 265,284 | 272,160 | 280,218 | 3.30 | 2.61 | 2.59 | 2.96 |
| | Persons | 365,299 | 378,771 | 389,138 | 399,755 | 412,513 | 3.69 | 2.74 | 2.73 | 3.19 |
| Total | Registrations | 315,215 | 325,548 | 334,088 | 343,236 | 352,769 | 3.28% | 2.62% | 2.74% | 2.78% |
| | Persons | 499,078 | 515,853 | 528,694 | 543,430 | 558,439 | 3.36% | 2.49% | 2.79% | 2.76% |

(1) The population figures are as at March 31, calculated in July.

(2) Persons covered under the Seniors' Pension, or Palliative Care coverage categories receive premium-free coverage.

Table 4.2

**Non-Group Supplementary Coverage:
Number of Registrations and Persons Covered by Coverage Category and
Level of Premium Payment as at March 31, 2004, 2005, 2006, 2007 and 2008⁽¹⁾⁽²⁾**

| Registration Status | | Total | | | | | Regular Premium | | | | |
|---------------------|---------------|---------------|---------------|---------------|---------------|---------------|-----------------|---------------|---------------|---------------|---------------|
| | | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 |
| One Person | Registrations | 167,467 | 172,034 | 176,298 | 180,525 | 184,868 | 18,425 | 19,289 | 19,016 | 19,094 | 20,557 |
| | Persons | 167,467 | 172,034 | 176,298 | 180,525 | 184,868 | 18,425 | 19,289 | 19,016 | 19,094 | 20,557 |
| Two Persons | Registrations | 128,520 | 133,729 | 137,844 | 142,369 | 147,228 | 15,971 | 16,318 | 16,819 | 17,517 | 18,584 |
| | Persons | 257,040 | 267,458 | 275,688 | 284,738 | 294,456 | 31,942 | 32,636 | 33,638 | 35,034 | 37,168 |
| Three or More | Registrations | 19,228 | 19,785 | 19,946 | 20,342 | 20,673 | 11,552 | 11,970 | 11,747 | 12,020 | 12,707 |
| | Persons | 74,571 | 76,361 | 76,708 | 78,167 | 79,115 | 45,636 | 47,100 | 46,050 | 46,949 | 49,373 |
| Total | Registrations | 315,215 | 325,548 | 334,088 | 343,236 | 352,769 | 45,948 | 47,577 | 47,582 | 48,631 | 51,848 |
| | Persons | 499,078 | 515,853 | 528,694 | 543,430 | 558,430 | 96,003 | 99,025 | 98,704 | 101,077 | 107,098 |

| Registration Status | | Subsidized Premium | | | | | Seniors | | | | |
|---------------------|---------------|--------------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|
| | | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 |
| One Person | Registrations | 9,844 | 10,226 | 11,473 | 12,461 | 11,776 | 137,402 | 140,982 | 144,563 | 148,010 | 151,797 |
| | Persons | 9,844 | 10,226 | 11,473 | 12,461 | 11,776 | 137,402 | 140,982 | 144,563 | 148,010 | 151,797 |
| Two Persons | Registrations | 4,513 | 4,649 | 4,916 | 5,021 | 4,452 | 107,946 | 112,692 | 116,058 | 119,791 | 124,164 |
| | Persons | 9,026 | 9,298 | 9,832 | 10,042 | 8,904 | 215,892 | 225,384 | 232,116 | 239,582 | 248,328 |
| Three or More | Registrations | 4,642 | 4,566 | 4,833 | 4,963 | 4,475 | 2,999 | 3,220 | 3,346 | 3,347 | 3,485 |
| | Persons | 18,906 | 18,533 | 19,547 | 20,095 | 18,148 | 9,907 | 10,627 | 11,044 | 11,084 | 11,575 |
| Total | Registrations | 18,999 | 19,441 | 21,222 | 22,445 | 20,703 | 248,347 | 256,894 | 263,967 | 271,148 | 279,446 |
| | Persons | 37,776 | 38,057 | 40,852 | 42,598 | 38,828 | 363,201 | 376,993 | 387,723 | 398,676 | 411,700 |

| Registration Status | | Widows' Pension | | | | |
|---------------------|---------------|-----------------|---------------|---------------|---------------|---------------|
| | | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 |
| One Person | Registrations | 1,796 | 1,537 | 1,246 | 960 | 738 |
| | Persons | 1,796 | 1,537 | 1,246 | 960 | 738 |
| Two Persons | Registrations | 90 | 70 | 51 | 40 | 28 |
| | Persons | 180 | 140 | 102 | 80 | 56 |
| Three or More | Registrations | 35 | 29 | 20 | 12 | 6 |
| | Persons | 122 | 101 | 67 | 39 | 19 |
| Total | Registrations | 1,921 | 1,636 | 1,317 | 1,012 | 772 |
| | Persons | 2,098 | 1,778 | 1,415 | 1,079 | 813 |

Did You Know?

Ambulance transportation, except for inter-facility transfers, is not an insured service. Supplemental health coverage is recommended for this service.

(1) The population figures are as at March 31, calculated in July.

(2) The report reflects a discrete count of people receiving Non-Group Supplementary coverage. The table excludes people on the Palliative Care Drug Program as those under the program who were seniors, purchased non-group coverage or received the Alberta Widows' Pension are accounted for under these coverage categories.

Note: As at March 31, 2008, 1,129 people were covered by the Palliative Care Drug Program. Of these, 379 are not included in this table as they were covered only under the Palliative Care Drug Program and had no other Non-Group Supplementary Coverage.

Table 4.3
Non-Group Supplementary Coverage:
Persons Covered by Age and Gender
as at March 31, 2004, 2005, 2006, 2007 and 2008⁽¹⁾

| Age Group | Total | | | | | Male | | | | | Female | | | | |
|-----------------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|
| | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 | 2003/ 2004 | 2004/ 2005 | 2005/ 2006 | 2006/ 2007 | 2007/ 2008 |
| Under 1 | 883 | 905 | 938 | 1,031 | 940 | 430 | 453 | 486 | 510 | 457 | 453 | 452 | 452 | 521 | 483 |
| 1 - 4 | 3,936 | 3,871 | 4,128 | 4,328 | 4,390 | 1,935 | 1,935 | 2,065 | 2,163 | 2,245 | 2,001 | 1,936 | 2,063 | 2,165 | 2,145 |
| 5 - 14 | 16,089 | 16,363 | 16,239 | 16,499 | 16,437 | 8,393 | 8,416 | 8,367 | 8,432 | 8,400 | 7,696 | 7,947 | 7,872 | 8,067 | 8,037 |
| 15 - 24 | 23,085 | 24,115 | 24,010 | 24,189 | 24,209 | 11,158 | 11,646 | 11,564 | 11,786 | 11,860 | 11,927 | 12,469 | 12,446 | 12,403 | 12,349 |
| 25 - 44 | 26,497 | 26,701 | 26,967 | 27,579 | 27,805 | 11,375 | 11,360 | 11,494 | 11,818 | 12,023 | 15,122 | 15,341 | 15,473 | 15,761 | 15,782 |
| 45 - 64 | 102,205 | 106,996 | 109,419 | 112,728 | 116,102 | 35,966 | 37,709 | 38,662 | 40,102 | 41,494 | 66,239 | 69,287 | 70,757 | 72,626 | 74,608 |
| 65 - 74 | 177,299 | 182,088 | 185,488 | 189,721 | 195,734 | 85,422 | 88,351 | 90,034 | 91,895 | 94,975 | 91,877 | 93,737 | 95,454 | 97,826 | 100,759 |
| 75 & Older | 149,084 | 154,814 | 161,505 | 167,355 | 172,822 | 59,272 | 62,057 | 65,279 | 68,239 | 70,928 | 89,812 | 92,757 | 96,226 | 99,116 | 101,894 |
| Total | 499,078 | 515,853 | 528,694 | 543,430 | 558,439 | 213,951 | 221,927 | 227,951 | 234,945 | 242,382 | 285,127 | 293,926 | 300,743 | 308,485 | 316,057 |

| Age Group | Percentage Change Total | | | | Percentage Change Male | | | | Percentage Change Female | | | |
|-----------------------|-------------------------|---------------|---------------|---------------|------------------------|---------------|---------------|---------------|--------------------------|---------------|---------------|---------------|
| | 2005/ 2004 | 2006/ 2005 | 2007/ 2006 | 2008/ 2007 | 2005/ 2004 | 2006/ 2005 | 2007/ 2006 | 2008/ 2007 | 2005/ 2004 | 2006/ 2005 | 2007/ 2006 | 2008/ 2007 |
| Under 1 | 2.49 | 3.65 | 9.91 | (8.83) | 5.35 | 7.28 | 4.94 | (10.39) | (0.22) | 0.00 | 15.27 | (7.29) |
| 1 - 4 | (1.65) | 6.64 | 4.84 | 1.43 | 0.00 | 6.72 | 4.75 | 3.79 | (3.25) | 6.56 | 4.94 | (0.92) |
| 5 - 14 | 1.70 | (0.76) | 1.60 | (0.38) | 0.27 | (0.58) | 0.78 | (0.38) | 3.26 | (0.94) | 2.48 | (0.37) |
| 15 - 24 | 4.46 | (0.44) | 0.75 | 0.08 | 4.37 | (0.70) | 1.92 | 0.63 | 4.54 | (0.18) | (0.35) | (0.44) |
| 25 - 44 | 0.77 | 1.00 | 2.27 | 0.82 | (0.13) | 1.18 | 2.82 | 1.73 | 1.45 | 0.86 | 1.86 | 0.13 |
| 45 - 64 | 4.69 | 2.26 | 3.02 | 2.99 | 4.85 | 2.53 | 3.72 | 3.47 | 4.60 | 2.12 | 2.64 | 2.73 |
| 65 - 74 | 2.70 | 1.87 | 2.28 | 3.17 | 3.43 | 1.90 | 2.07 | 3.35 | 2.02 | 1.83 | 2.48 | 3.00 |
| 75 & Older | 3.84 | 4.32 | 3.62 | 3.27 | 4.70 | 5.19 | 4.53 | 3.94 | 3.28 | 3.74 | 3.00 | 2.80 |
| Total | 3.36% | 2.49% | 2.79% | 2.76% | 3.73% | 2.71% | 3.07% | 3.17% | 3.09% | 2.32% | 2.57% | 2.45% |

(1) The population figures are as at March 31, calculated in July each year.

Table 4.4
Non-Group Supplementary Coverage:
Number of Discrete Recipients and Net Payment by Coverage Category,
Level of Premium Payment and Type of Service
for the Year Ending March 31, 2008⁽¹⁾

| Coverage Category and Type of Service | Discrete Recipients | Net Payment ⁽²⁾ | Net Payment per Recipient |
|---------------------------------------|---------------------|----------------------------|---------------------------|
| <u>Regular Premium</u> | | | |
| Ambulance | 3,014 | 739,873 | 245 |
| Drugs | 92,032 | 108,100,138 | 1,175 |
| Hospital Accommodation | 869 | 142,936 | 164 |
| Other ⁽³⁾ | 821 | 126,756 | 154 |
| Subtotal | 92,538 | \$109,109,703 | \$1,179 |
| <u>Subsidized Premium</u> | | | |
| Ambulance | 1,211 | 339,273 | 280 |
| Drugs | 31,488 | 30,838,954 | 979 |
| Hospital Accommodation | 257 | 38,795 | 151 |
| Other | 151 | 26,388 | 175 |
| Subtotal | 31,613 | \$31,243,410 | \$988 |
| <u>Seniors</u> | | | |
| Ambulance | 48,716 | 19,368,861 | 398 |
| Drugs | 363,552 | 465,615,779 | 1,281 |
| Hospital Accommodation | | | |
| Other | 5,403 | 5,158,936 | 955 |
| Subtotal | 367,823 | \$490,143,576 | \$1,333 |
| <u>Widows' Pension</u> | | | |
| Ambulance | 63 | 30,544 | 485 |
| Drugs | 828 | 851,339 | 1,028 |
| Hospital Accommodation | | | |
| Other | 4 | 3,907 | 977 |
| Subtotal | 838 | \$885,790 | \$1,057 |
| <u>Palliative Care</u> | | | |
| Ambulance | | | |
| Drugs | 733 | 1,573,276 | 2,146 |
| Hospital Accommodation | | | |
| Other | | | |
| Subtotal | 733 | \$1,573,276 | \$2,146 |
| <u>Total</u> | | | |
| Ambulance | 52,980 | 20,478,550 | 387 |
| Drugs | 484,216 | 606,979,487 | 1,254 |
| Hospital Accommodation | 1,126 | 181,731 | 161 |
| Other | 6,377 | 5,315,987 | 834 |
| Total | 489,104 | \$632,955,754 | \$1,294 |

(1) A blank cell represents a zero value.

(2) The sum of net payments may not match the sub-totals or totals due to rounding.

(3) Other service includes clinical psychology, home nursing, prostheses and orthotics, and mastectomy prostheses.

Table 4.5
Non-Group Supplementary Coverage:
Number of Prescriptions and Net Payment
by Prescription Type and Coverage Category
for the Year Ending March 31, 2008⁽¹⁾

| Prescription Type and Coverage Category | Number of Prescriptions ⁽²⁾ | Net Payment ⁽³⁾ |
|--|--|----------------------------|
| <u>Prescription Drugs⁽⁴⁾</u> | | |
| Regular Premium | 1,445,583 | 106,332,872 |
| Subsidized Premium | 518,710 | 30,218,582 |
| Seniors | 9,460,595 | 458,023,558 |
| Widows' Pension | 15,721 | 836,908 |
| Palliative Care | 24,921 | 1,534,380 |
| Subtotal | 11,465,530 | \$596,946,300 |
| <u>Over-The-Counter⁽⁵⁾</u> | | |
| Regular Premium | 50,244 | 1,767,266 |
| Subsidized Premium | 18,271 | 620,372 |
| Seniors | 319,970 | 7,593,379 |
| Widows' Pension | 458 | 14,431 |
| Palliative Care | 3,184 | 38,897 |
| Subtotal | 392,127 | \$10,034,345 |
| <u>Adjustments⁽⁶⁾</u> | | |
| Regular Premium | | |
| Subsidized Premium | | |
| Seniors | 3 | (1,158) |
| Widows' Pension | | |
| Palliative Care | | |
| Subtotal | 3 | (\$1,158) |
| <u>All Prescriptions</u> | | |
| Regular Premium | 1,495,827 | 108,100,138 |
| Subsidized Premium | 536,981 | 30,838,954 |
| Seniors | 9,780,568 | 465,615,779 |
| Widows' Pension | 16,179 | 851,339 |
| Palliative Care | 28,105 | 1,573,276 |
| Total | 11,857,660 | \$606,979,487 |

(1) A blank cell represents a zero value.

(2) Number of prescriptions represents the number of transactions reported by Alberta Blue Cross.

(3) The sum of net payments may not match the sub-totals or totals due to rounding.

(4) Refers to drugs available only with a prescription.

(5) Refers to an otherwise over-the-counter drug type which has been prescribed for these members.

(6) Adjustments refer to retroactive transactions (e.g. coverage effective dates and cancellations, refunds, etc.).

Table 4.6
Number and Percentage Change of
Licensed Community Pharmacies in Alberta
as at March 31, 2004, 2005, 2006, 2007 and 2008⁽¹⁾

| Year | Number of Pharmacies | Percentage Change from the Prior Year |
|---|----------------------|---------------------------------------|
| 2003/2004 | 865 | n.a. |
| 2004/2005 | 865 | 0.00 |
| 2005/2006 | 893 | 3.24 |
| 2006/2007 | 912 | 2.13 |
| 2007/2008 | 945 | 3.62 |
| Annual Average Percentage Change for Last 5 Years | | 2.24 |

(1) Data provided by the Alberta College of Pharmacists.

Did You Know?

Since 1997, drugs continue to be one of the fastest-growing categories of health care spending after hospitals. Drugs currently account for 17% of total Canadian health expenditures.

Source: Canadian Institute for Health Information website

Table 4.7
Non-Group Supplementary Coverage:
Ten Highest Prescription Drug Expenditures
by Net Payment and Coverage Category
for the Year Ending March 31, 2008

| Coverage Category | Drug Name | Strength | Major Uses | Number of Prescriptions ⁽¹⁾ | Discrete Recipients | Net Payment |
|---|--------------------------|----------------------|--|--|---------------------|-------------|
| All Groups | | | | | | |
| | Pantoloc | 40mg | Ulcer Treatment | 210,206 | 46,554 | 24,052,441 |
| | Lipitor | 10 mg | Cholesterol Lowering Agent | 167,799 | 41,772 | 19,823,453 |
| | Lipitor | 20 mg | Cholesterol Lowering Agent | 129,415 | 31,856 | 18,789,689 |
| | Prevacid | 30 mg | Ulcer Treatment | 116,141 | 30,355 | 15,389,107 |
| | Norvasc | 5 mg | High Blood Pressure/ Angina | 156,449 | 35,313 | 12,618,474 |
| | Norvasc | 10 mg | High Blood Pressure/ Angina | 88,705 | 20,014 | 11,248,109 |
| | Apo-Omeprazole (capsule) | 20 mg | Ulcer Treatment | 152,787 | 36,212 | 10,935,506 |
| | Lipitor | 40 mg | Cholesterol Lowering Agent | 70,407 | 16,706 | 10,447,125 |
| | Plavix | 75 mg | Prevention of Heart Attack & Stroke | 77,675 | 14,969 | 9,978,392 |
| | Copaxone | 20 mg/ml syringe | Multiple Sclerosis | 6,691 | 901 | 9,414,266 |
| Regular and Subsidized Premium⁽²⁾ | | | | | | |
| | Copaxone | 20 mg/ml syringe | Multiple Sclerosis | 6,611 | 885 | 9,209,525 |
| | Remicade | 100 mg vial | Rheumatoid Arthritis/Crohn's Disease | 3,002 | 462 | 6,699,014 |
| | Rebif | 44 mcg/syringe | Multiple Sclerosis | 2,918 | 343 | 4,748,828 |
| | Enbrel | 50 mg/ml syringe | Rheumatoid Arthritis/Psoriatic Arthritis/Psoriasis | 3,762 | 354 | 3,907,698 |
| | Pantoloc | 40 mg | Ulcer Treatment | 27,418 | 7,556 | 3,399,860 |
| | Lipitor | 20 mg | Cholesterol Lowering Agent | 19,901 | 5,543 | 2,905,474 |
| | Prevacid | 30 mg | Ulcer Treatment | 20,921 | 6,185 | 2,763,195 |
| | Lipitor | 10 mg | Cholesterol Lowering Agent | 21,644 | 6,208 | 2,529,977 |
| | Betaseron | 9.6 million IU vial | Multiple Sclerosis | 1,446 | 175 | 2,174,104 |
| | Humira | 40 mg/0.8 ml syringe | Rheumatoid Arthritis/Psoriatic Arthritis/Psoriasis | 1,733 | 179 | 1,843,180 |
| Seniors⁽³⁾ | | | | | | |
| | Pantoloc | 40 mg | Ulcer Treatment | 181,996 | 38,758 | 20,574,352 |
| | Lipitor | 10 mg | Cholesterol Lowering Agent | 145,875 | 35,471 | 17,255,981 |
| | Lipitor | 20 mg | Cholesterol Lowering Agent | 109,338 | 26,256 | 15,851,685 |
| | Prevacid | 30 mg | Ulcer Treatment | 94,898 | 24,077 | 12,592,766 |
| | Norvasc | 5 mg | High Blood Pressure/ Angina | 143,128 | 31,745 | 11,516,274 |
| | Norvasc | 10 mg | High Blood Pressure/ Angina | 77,534 | 17,167 | 9,780,485 |
| | Apo-Omeprazole (capsule) | 20 mg | Ulcer Treatment | 132,536 | 30,416 | 9,393,557 |
| | Plavix | 75 mg | Prevention of Heart Attack & Stroke | 71,290 | 13,557 | 9,140,511 |
| | Lipitor | 40 mg | Cholesterol Lowering Agent | 59,654 | 13,752 | 8,775,148 |
| | Spiriva | 18 mcg inh cap | Chronic Obstructive Pulmonary Disease | 50,688 | 14,378 | 6,644,823 |

(1) Number of prescriptions represents the number of transactions reported by Alberta Blue Cross.

(2) Persons eligible for basic health services at reduced premium rates were also eligible for Non-Group Supplementary Coverage at reduced premium rates.

(3) Seniors refers to the registration status of Account Holder or Spouse Partner Age 65 or Older and their dependants.

Continued...

Table 4.7
Non-Group Supplementary Coverage:
Ten Highest Prescription Drug Expenditures
by Net Payment and Coverage Category
for the Year Ending March 31, 2008

| Coverage Category | Drug Name | Strength | Major Uses | Number of Prescriptions ⁽¹⁾ | Discrete Recipients | Net Payment |
|------------------------|--------------------------|-------------------|---------------------------------------|--|---------------------|-------------|
| Widows' Pension | | | | | | |
| | Pantoloc | 40 mg | Ulcer Treatment | 270 | 89 | 41,461 |
| | Lipitor | 10 mg | Cholesterol Lowering Agent | 268 | 88 | 36,064 |
| | Lipitor | 20 mg | Cholesterol Lowering Agent | 155 | 50 | 30,735 |
| | Prevacid | 30 mg | Ulcer Treatment | 150 | 63 | 24,881 |
| | Symbicort Turbuhaler | 200 mcg/6 mcg | Asthma | 153 | 37 | 18,220 |
| | Apo-Omeprazole (capsule) | 20 mg | Ulcer Treatment | 244 | 64 | 17,802 |
| | Crestor | 10 mg | Cholesterol Lowering Agent | 124 | 38 | 14,052 |
| | Norvasc | 5 mg | High Blood Pressure/Angina | 165 | 47 | 13,698 |
| | Norvasc | 10mg | High Blood Pressure/Angina | 80 | 26 | 12,944 |
| | Spiriva | 18 mcg inh cap | Chronic Obstructive Pulmonary Disease | 86 | 25 | 12,527 |
| Palliative Care | | | | | | |
| | Sandostatin LAR | 20 mg vial | Endocrine Tumor | 68 | 9 | 83,764 |
| | Innohep | 20,000 IU/ml | Prevention of Blood Clots | 198 | 36 | 68,308 |
| | Fragmin | 25,000 IU/ml | Prevention of Blood Clots | 144 | 25 | 63,801 |
| | Sandostatin LAR | 30 mg vial | Endocrine Tumor | 29 | 5 | 54,536 |
| | Ratio-Fentanyl | 100 mcg/hr patch | Pain Management | 235 | 48 | 39,700 |
| | Bonafos | 60 mg/ml inject'n | High Calcium Blood Level | 115 | 20 | 37,775 |
| | Pantoloc | 40 mg | Ulcer Treatment | 522 | 151 | 36,768 |
| | Octreotide Acetate Omega | 200 mcg/ml | Endocrine Tumor | 210 | 30 | 36,681 |
| | PMS-Ondansetron | 8 mg | Severe Nausea/Vomiting | 250 | 76 | 33,679 |
| | Hydromorph Contin | 30 mg | Pain Management | 84 | 21 | 31,695 |

(1) Number of prescriptions represents the number of transactions reported by Alberta Blue Cross.

Table 4.8
Non-Group Supplementary Coverage:
Costs of Prescription by Broad Drug Category
for the Year Ending March 31, 2008

| Broad Drug Category | Number of Prescriptions⁽¹⁾ | Net Payment | Co-Payment⁽²⁾ | Coordination of Benefits⁽³⁾ | Average Gross Cost per Prescription⁽⁴⁾ |
|--|--|----------------------|---------------------------------|---|--|
| Antihistamines | 684 | 13,713 | 3,054 | 184 | 24.78 |
| Antineoplastic Agents | 28,416 | 1,010,493 | 349,964 | 27,574 | 48.85 |
| Antitussives, Expectorants, Mucolytics | 1,935 | 91,782 | 20,337 | 2,014 | 58.98 |
| Anti-Infective Agents | 637,552 | 17,498,535 | 5,593,546 | 509,365 | 37.02 |
| Autonomic Drugs | 486,966 | 40,929,299 | 6,962,266 | 470,054 | 99.31 |
| Blood Formation and Coagulation | 312,769 | 22,155,215 | 2,337,912 | 537,101 | 80.03 |
| Cardiovascular Drugs | 3,195,105 | 206,989,120 | 48,409,712 | 2,251,060 | 80.64 |
| Central Nervous System Drugs | 2,456,017 | 87,817,982 | 23,067,605 | 2,293,950 | 46.08 |
| Compound Drugs | | | | | |
| Devices ⁽⁵⁾ | 5,021 | 92,186 | 39,687 | 1,067 | 26.48 |
| Diagnostic Agents | | | | | |
| Electrolytic, Caloric, Water Balance | 842,624 | 8,544,047 | 3,609,026 | 118,435 | 14.56 |
| Enzymes | 542 | 2,237,286 | 11,889 | 880 | 4,151.39 |
| Eye, Ear, Nose & Throat Preparations | 333,796 | 9,487,769 | 3,106,055 | 106,633 | 38.05 |
| Gastrointestinal Drugs | 788,594 | 65,475,511 | 12,259,948 | 1,124,566 | 100.00 |
| Gold Compounds | 1,094 | 69,612 | 17,271 | 1,301 | 80.61 |
| Heavy Metal Antagonists | 1,013 | 166,535 | 18,135 | 7,500 | 189.70 |
| Hormones & Synthetic Substitutes | 1,433,646 | 46,357,667 | 12,599,150 | 898,163 | 41.75 |
| Local Anaesthetics | | | | | |
| Serums, Toxoids, and Vaccines | 2,382 | 150,134 | 32,626 | 1,406 | 77.32 |
| Skin & Mucous Membrane Preparations | 284,454 | 5,004,851 | 2,020,014 | 103,527 | 25.06 |
| Smooth Muscle Relaxants | 69,846 | 3,002,878 | 752,178 | 34,638 | 54.26 |
| Out of Country & Special Access | 1,533 | 62,672 | 11,242 | 544 | 48.57 |
| Unclassified Therapeutic Agents | 882,556 | 88,826,932 | 12,042,149 | 6,726,409 | 121.91 |
| Undetermined ⁽⁶⁾ | 3 | (1,158) | 7 | 5 | (382.02) |
| Vitamins | 91,112 | 996,425 | 359,718 | 23,033 | 15.14 |
| Total⁽⁷⁾ | 11,857,660 | \$606,979,487 | \$133,623,490 | \$15,239,409 | \$63.74 |

(1) Number of prescriptions represents the number of transactions reported by Alberta Blue Cross.

(2) Co-Payment represents the portion of the prescription cost the recipient pays when a prescription is filled.

(3) Coordination of Benefits represents amounts paid by other supplementary health plans. Coordination of Benefits would apply in situations where a person submits a claim to more than one supplementary health plan.

(4) Gross Cost = Net Payment + Co-Payment + Coordination of Benefits.

(5) Only those devices used with prescription drugs.

(6) Negative payments represent adjustments and or reversals of claim payments.

(7) The sums of the columns may not match the totals due to rounding.

Table 4.9
Non-Group Supplementary Coverage:
Number of Prescriptions and Prescription Cost Components
by Coverage Category (Direct Bill Claims Only)
for the Year Ending March 31, 2008⁽¹⁾

| Coverage Category | Number of Prescriptions ⁽²⁾ | Drug Material Cost | Dispensing Fee ⁽³⁾ | Additional Inventory Allowance ⁽⁴⁾ | Adjustments ⁽⁵⁾ | Gross Cost ⁽⁶⁾ | Co-Payment ⁽⁷⁾ | Coordination of Benefits ⁽⁸⁾ | Net Payment ⁽⁹⁾ |
|---------------------------------------|--|----------------------|-------------------------------|---|----------------------------|---------------------------|---------------------------|---|----------------------------|
| | | [A] | [B] | [C] | [D] | [E] | [F] | [G] | [H] |
| Regular and Subsidized Premium | 1,990,646 | 149,106,037 | 20,508,148 | 2,143,469 | 14 | 171,757,668 | 23,141,490 | 11,728,170 | 136,888,008 |
| Seniors | 9,750,062 | 468,037,412 | 97,107,031 | 10,643,094 | (1,190) | \$75,786,347 | 109,155,607 | 2,501,798 | 464,128,942 |
| Widows' Pension | 16,047 | 868,520 | 162,290 | 19,101 | 0 | 1,049,911 | 193,702 | 12,655 | 843,553 |
| Palliative Care | 27,198 | 1,496,322 | 340,138 | 18,862 | 0 | 1,855,322 | 170,058 | 142,861 | 1,542,404 |
| Average Cost per Prescription | | \$2.57 | \$10.02 | \$1.09 | | \$63.68 | \$11.26 | \$1.22 | \$51.21 |
| Total⁽¹⁰⁾ | 11,783,953 | \$619,508,291 | \$118,117,606 | \$12,824,527 | -\$1,176 | \$750,449,249 | \$132,660,857 | \$14,385,484 | \$603,402,908 |

(1) A direct bill claim is submitted for payment directly to Alberta Blue Cross by the pharmacy.

(2) Number of prescriptions represents the number of transactions reported by Alberta Blue Cross.

(3) The dispensing fee is the portion of the overall prescription cost that covers pharmacists' professional services and business overhead.

(4) Additional Inventory Allowance is an additional fee paid to pharmacies to compensate for a portion of their inventory management.

(5) Adjustments refer to retroactive transactions (e.g. coverage effective dates and cancellations, refunds, etc.).

(6) Gross Cost [E] = [A] + [B] + [C] + [D].

(7) Co-payment represents the portion of the prescription cost the recipient pays when a prescription is filled.

(8) Coordination of Benefits represents amounts paid by other supplementary health plans. Coordination of Benefits would apply in situations where a person submits a claim to more than one supplementary health plan.

(9) Net Payment [H] = [E] - [F] - [G].

(10) The sums of the columns may not match the totals due to rounding.

Glossary/Definitions

A double dash (--) represents a non-zero value; actual value was too small to be shown.

Alberta Health Care Insurance Plan (AHCIP)

A non-profit, publicly funded plan administered and operated by Alberta Health and Wellness under the *Alberta Health Care Insurance Act* and its regulations. The AHCIP pays for insured physician and dental/oral surgical services as required under the *Canada Health Act*, and a number of allied health services provided to eligible residents of Alberta.

Alternate Relationship Plans (ARP)

Plans that provide physicians with an alternative to the traditional fee-for-service payment method, and provide physicians with flexibility in the way they provide care. ARPs enable a team-based approach and promote improved access to care, patient satisfaction and the recruitment/retention of physicians.

Allied Health Services

Services provided by dentists, chiropractors, optometrists and podiatrists, and paid by the AHCIP.

Basic Health Services

Insured services provided by physicians and dentists/oral surgeons as well as a number of services provided by optometrists, chiropractors and podiatrists.

Blank Cell

Represents a zero value.

Bracketed Data

Bracketed data () indicate negative figures.

Clinical Stabilization Initiative (CSI)

This initiative was established in the 2006 Amending Agreement to the Tri-Lateral Master Agreement and includes the Rural, Remote Northern Program (RRNP), the Business Cost Program (BCP), and the Communities in Crisis program. The purpose of the RRNP is to improve physician recruitment and retention in underserved areas by providing physician incentive programs. The BCP is intended to help physicians with the rising costs associated with running community offices by paying a flat bonus on top of each office-based or consultative service provided by all physicians in any community in Alberta. Communities in Crisis address the challenges of recruiting physicians to live and practice in communities in crisis.

Discrete Count

The discrete items are only counted once.

Discrete Patients

The number of individuals registered with the Alberta Health Care Insurance Plan (AHCIP) who received at least one basic health service paid on a fee-for-service basis by the AHCIP. Discrete patients are only counted once. Individuals who are registered with the AHCIP but did not receive any services in the current year are not included in the discrete fee-for-service patient count, but are included in the registration data. Unless otherwise noted, the data in the Statistical Supplement are based on the number of discrete patients.

Discrete Service Providers

The number of practitioners who provided at least one service payable under the Alberta Health Care Insurance Plan. Discrete service providers are only counted once.

FP

Family Physician

FTE

Full-time equivalent

Fee-for-Service

Fee-for-service is a standard business model in which services are unbundled and paid for separately. In the health insurance and health care industry, fee-for-service refers to practitioner payments for individual services such as office visits, procedures or other health services.

Fiscal Year

April 1 of one year to March 31 of the following year.

GP

General practitioner

Health Regions

A geographic area within Alberta that has been identified and defined for the purpose of assigning responsibility for and authority over the delivery of health care services within its boundaries. In 2007-2008, there are nine health regions in Alberta.

Insured Services

Physician and dental/oral surgical services as defined by the *Canada Health Act* and the *Alberta Health Care Insurance Act*.

Medical Assessments

Primarily office visits and consultations.

Medical Services

Services provided by a physician.

N/A

Not available.

n.a.

Not applicable.

Net Payment

The total amount paid by Alberta Health and Wellness through Non-Group Supplementary plans.

Nil

No change.

Non-Group Supplementary Plans

Supplementary health services coverage, administered by Alberta Blue Cross on behalf of Alberta Health and Wellness for prescription drugs and selected health services.

Number of Services

Some health services listed in the schedules of benefits are paid based on time units. Where applicable, the number of services reported in the tables is the number of time units paid.

Practitioner

Licensed health care provider who is registered with the Alberta Health Care Insurance Plan and provides basic health services.

Practitioner Payments

Gross fee-for-service practitioner payments made by the Alberta Health Care Insurance Plan for basic health services. Represents neither the total income nor the net income of a practitioner. Unless otherwise stated, payment data are reported on a date-of-service basis and includes only fee-for-service payments to Alberta practitioners for services provided to Alberta residents.

Primary Care Networks (PCNs)

Networks of family physicians that use a team approach with other health care professionals to coordinate primary care for their patients. PCNs receive program funding in addition to fee-for-service.

Recipient Location

The health region where the person who received the health service lived at the time of service (according to the Alberta Health Care Insurance Plan registration data).

Registration

The number of single and family accounts registered with the Alberta Health Care Insurance Plan; one person (as in single coverage) or two or more people (as in family coverage).

Registered/Insured Persons

Alberta residents insured under a program and therefore entitled to receive benefits.

Schedule of Benefits

List of practitioner services and fee-for-service rates paid by the Alberta Health Care Insurance Plan. Includes the general rules, procedure list, fee modifier definitions and price list. The Statistical Supplement includes data for six distinct benefit schedules (medical, oral and maxillofacial surgery, chiropractic, optometry, podiatric surgery and podiatry).

Service Location

The health region where a health service was provided.

Year at a Glance

| | 2006/2007 | 2007/2008 |
|--|-----------------|-----------------|
| Total Albertans covered under the Alberta Health Care Insurance Plan | 3,384,625 | 3,473,996 |
| Non-seniors | 2,985,949 | 3,062,296 |
| Seniors | 398,676 | 411,700 |
| <hr/> | | |
| Alberta Health Care Insurance Plan premium rates | | |
| Single coverage | \$44 | \$44 |
| Family coverage (two or more persons) | \$88 | \$88 |
| <hr/> | | |
| Number of Albertans receiving full or partially subsidized premiums | 818,875 | 810,613 |
| Per cent of total population | 24% | 23% |
| Percentage change from prior year | 3% | (1%) |
| <hr/> | | |
| Number of Albertans receiving fully subsidized premiums | 787,471 | 774,309 |
| Percentage change | 5% | (2%) |
| <hr/> | | |
| Amount paid to Alberta practitioners (fee-for-service) | \$1,632,974,756 | \$1,799,224,796 |
| Physicians | \$1,558,128,163 | \$1,718,717,022 |
| Allied Practitioners | \$74,846,593 | \$80,507,77 |
| <hr/> | | |
| Average annual fee-for-service payment | | |
| All Physicians (except Pathology) | \$266,347 | \$283,710 |
| All Specialists (except General/Family Physicians and Pathology) | \$335,770 | \$357,101 |
| <hr/> | | |
| Number of practitioners who submitted fee-for-service claims | 7,411 | 7660 |
| Physicians (including General Practitioners) | 5,850 | 6058 |
| General Practitioners | 3,237 | 3361 |
| Dentists/Oral Surgeons | 220 | 207 |
| Chiropractors | 890 | 906 |
| Optometrists | 397 | 434 |
| Podiatrists | 54 | 55 |
| <hr/> | | |
| Number of physicians by gross payment range (fee-for-service) ¹ | | |
| Less than \$500,000 | 5,247 | 5310 |
| More than \$500,000 | 603 | 748 |
| More than \$1 million | 123 | 150 |
| More than \$2 million | 20 | 23 |

¹ These statistics cannot be used as an accurate measure of a practitioner's personal income, because they do not depict other sources of income and the figures quoted are payments from which practitioners pay business expenses, such as office and staff expenses.

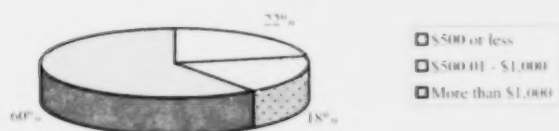
| | 2006/2007 | 2007/2008 |
|--|---------------|---------------|
| Alternate Relationship Plans | | |
| Total expenditures | \$151,295,359 | \$147,163,837 |
| Total Alternate Relationship Plans | 37 | 41 |
| Total physicians | 862 | 1029 |
| Primary Care Networks | | |
| Total payments | \$78,520,586 | \$52,660,560 |
| Total Primary Care Networks | 19 | 26 |
| Total physicians | 949 | 1,519 |
| Total patients enrolled | 1,241,630 | 1,699,374 |
| Allied services provided (fee-for-service) | | |
| Total number of services provided | 4,050,293 | 4,157,757 |
| Average number of services per practitioner | 2,595 | 2,595 |
| Payments for services received by patients in the region where they reside | | |
| Chinook Regional Health Authority | 86% | 87% |
| Palliser Health Region | 80% | 81% |
| Calgary Health Region | 97% | 97% |
| David Thompson Regional Health Authority | 76% | 77% |
| East Central Health | 51% | 52% |
| Capital Health | 97% | 97% |
| Aspen Regional Health Authority | 52% | 52% |
| Peace Country Health | 78% | 78% |
| Northern Lights Health Region | 70% | 68% |
| Unknown | 2% | 3% |
| Amount spent on Non-Group Supplementary coverage | \$611,357,089 | \$632,955,754 |
| Non-seniors | \$134,200,848 | \$140,353,113 |
| Seniors | \$473,951,697 | \$490,143,576 |
| Widows' Pension | \$1,199,412 | \$885,790 |
| Palliative Care | \$2,005,132 | \$1,573,276 |
| Number of community-based pharmacies in Alberta | 912 | 945 |

Year at a Glance

% of Patients by Payment Range for Services Provided by a Physician (Fee-For-Service)



% of Expenditures by Payment Range for Services Provided by a Physician (Fee-For-Service)



Average Cost per Service by Practitioner Type



Average Cost per Discrete Patient by Practitioner Type

